Image# 14941816862 PAGE 1 / 77

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORIW 3X	For Other Than An	Authorized	I Committe	ee		Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		mple: If typir r the lines.	g, type	12FE4M5		
AMERICAN ASSOCIA	ATION OF NURSE	E PRACTI	TIONERS	POLITIC	CAL ACTION		ΓΤΕΕ
ADDRESS (number and street)	PO BOX 12846						
Check if different than previously reported. (ACC)	AUSTIN				TX	78711	-
2. FEC IDENTIFICATION N	IUMBER ▼	CITY 🛦		S	STATE 🛦	ZIP CO	DE 🛦
C C00358903		3. IS THIS REPORT	\ <u>\</u>	IEW N) OR	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (X July 15 Quarterly Report (October 15 Quarterly Report (January 31 Year-End Report (July 31 Mid-Year Report (Non-electi Year Only) (MY)	Q2) PRE-Election Report for the President (d) 30-Day	he:		12C)	Sep	in the State o	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
Termination Repor (TER)	t	Election on	M = M /	D = D /	Y = Y = Y = Y	in the State o	of
5. Covering Period C		014	through	M M M	30	2014	
I certify that I have examined t	•	est of my know	wledge and b	elief it is true	e, correct and	complete.	
Type or Print Name of Treasur	er MEREDITH HEYDE						
Signature of Treasurer ME.	REDITH HEYDE		[Electronically	Filed] Da	ate 07	15	2014
NOTE: Submission of false, error	neous, or incomplete infor	mation may su	bject the pers	on signing th	is Report to th	e penalties of 2	U.S.C. §437g.
Office Use Only						FEC FOR Rev. 12/2	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AMERICAN ASSOCIATION OF NURSE PRACTITIONERS POLITICAL ACTION COMMITTEE

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		320210.84
	(b) Cash on Hand at Beginning of Reporting Period	344277.84	
	(c) Total Receipts (from Line 19)	137955.50	189567.50
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	482233.34	509778.34
7.	Total Disbursements (from Line 31)	45153.28	72698.28
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	437080.06	437080.06
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

AMERICAN ASSOCIATION OF NURSE PRACTITIONERS POLITICAL ACTION COMMITTEE

R	eport Covering the Period: From: 04	01 2014	To: 06 30 2014
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	26056.	00 33326.00
	(ii) Unitemized(iii) TOTAL (add	, 111899.	50 156241.50
	Lines 11(a)(i) and (ii)▶	137955.	50 189567.50
	(b) Political Party Committees	0.	0.00
	(c) Other Political Committees (such as PACs)	0.	0.00
	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry	107055	100567.50
12.	Totals to Line 33, page 5) Transfers From Affiliated/Other	137955.	50 189567.50
	Party Committees	0.0	0.00
13.	All Loans Received	0.1	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.4	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.0	0.00
16.	Refunds of Contributions Made to Federal Candidates and Other		
17.	Political Committees Other Federal Receipts	0.0	00 0.00
18.	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.0	0.00
	(a) Non-Federal Account (from Schedule H3)	0.0	0.00
	(b) Levin Funds (from Schedule H5)	0.	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	137955.	50 189567.50
20.	Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	137955.	50 189567.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
Operating Expenditures: (a) Allocated Federal/Non-Federal		Calcillati Teat-to-Date			
Activity (from Schedule H4)					
(i) Federal Share	0.00	0.00			
Ē					
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating	2045 70	2000 70			
Expenditures	2915.78	2960.78			
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2915.78	2960.78			
Transfers to Affiliated/Other Party	2510.70	2300.70			
Committees	0.00	0.00			
Contributions to					
Federal Candidates/Committees and Other Political Committees	41500.00	69000.00			
Independent Expenditures					
(use Schedule E)	0.00	0.00			
Coordinated Party Expenditures (2 U.S.C. §441a(d))	222				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00			
	0.00				
Loan Repayments Made	0.00	0.00			
	0.00	0.00			
Loans Made Refunds of Contributions To:	0.00	0.00			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00			
man Folitical Committees	0.00	7 7			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees					
(such as PACs)	0.00	0.00			
(d) Total Contribution Refunds	0.00	0.00			
(add Lines 28(a), (b), and (c))▶	0.00	0.00			
Other Disharasan	707.50	737.50			
Other Disbursements	737.50	737.50			
Federal Election Activity (2 U.S.C. §431(20))					
(a) Allocated Federal Election Activity					
(from Schedule H6)					
(i) Federal Share	0.00	0.00			
(ii) "Levin" Share	0.00	0.00			
(b) Federal Election Activity Paid Entirely					
With Federal Funds	0.00	0.00			
(c) Total Federal Election Activity (add	0.00	0.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00			
Total Diaburaamenta (add Lines 01/s) 00					
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	AE4E2 20	70000 00			
20, 27, 20, 20, 21, 20(u), 28 dilu 30(b))	45153.28	72698.28			
Total Federal Disbursements					
(subtract Line 21(a)(ii) and Line 30(a)(ii)					
from Line 31)	45153.28	72698.28			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	137955.50	189567.50
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	137955.50	189567.50
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2915.78	2960.78
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	2915.78	2960.78

Use separate schedule(s) for each category of the Detailed Summary Page

FOR I	LINE NU	PAGE	6	OF	77		
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Gale Address 300 Legent Dr.		Date of Receipt
Mailing Address 300 Legault Dr.		06 20 / Y Y Y Y Y Y
City Cary	State Zip Code NC 27513	Transaction ID : SA11AI.5855 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer SAS	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) 3. Gale Adcock	'	Date of Receipt
Mailing Address 300 Legault Dr.		06 20 2014
City Cary	State Zip Code NC 27513	Transaction ID : SA11AI.5857
FEC ID number of contributing federal political committee.	C 27515	Amount of Each Receipt this Period
Name of Employer SAS	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) C. JULIE ADKINS	ı	Date of Receipt
Mailing Address 208 SUSANN DRIVE		05 09 _ 2014 _
City WEST FRANKFORT	State Zip Code IL 62896-1937	Transaction ID : SA11AI.5860 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	130.00
Name of Employer SIMCA	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional) >	480.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION O	F NURSE PRACTITIONERS POLI	TICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) JULIE ADKINS Mailing Address 208 SUSANN DRIVE		Date of Receipt
	State 7in Code	06 17 2014
City WEST FRANKFORT	State Zip Code IL 62896-1937	Transaction ID : SA11AI.5861 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer SIMCA	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial) Jean Aertker Mailing Address 646 Riviera Dr.		Date of Receipt
City Tampa	State Zip Code FL 33606	05 25 2014 Transaction ID : SA11AI.5865 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer ARNP	Occupation Tampa OHS	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	
Full Name (Last, First, Middle Initial) Jean Aertker		Date of Receipt
Mailing Address 646 Riviera Dr.		06 19 2014 _
City Tampa	State Zip Code FL 33606	Transaction ID : SA11AI.5866 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer ARNP	Occupation Tampa OHS	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	
SUBTOTAL of Receipts This Page (optional)		290.00
TOTAL This Period (last page this line numbe	<u>-</u>	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Susan Apold		Date of Receipt
Mailing Address 25 Pamela Ln		06 21 2014
City New Rochelle	State Zip Code NY 10804-2403	Transaction ID : SA11AI.5867 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	130.00
Name of Employer Concordia College New York	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) 3. Cathy Arvidson Mailing Address 2487 Blue Canyon Cir	·	Date of Receipt
City	State Zip Code	05 13 2014 Transaction ID : SA11AI.5871
Idaho Falls FEC ID number of contributing federal political committee.	ID 83402-3932	Amount of Each Receipt this Period 65.00
Name of Employer Idaho State University	Occupation FNP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Cathy Arvidson	1	Date of Receipt
Mailing Address 2487 Blue Canyon Cir		06 19 2014
City Idaho Falls	State Zip Code ID 83402-3932	Transaction ID : SA11AI.5872 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer Idaho State University	Occupation FNP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	
SUBTOTAL of Receipts This Page (optional	l) >	315.00
TOTAL This Period (last page this line num	ber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	g the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Tracey Aude		Date of Receipt
Mailing Address 20405 Dean Rd		05 16 2014
City Chadwick	State Zip Code IL 61014	Transaction ID : SA11AI.5873
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 260.00
Name of Employer	Occupation CGH Medical Center	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	_
Full Name (Last, First, Middle Initial) 3. Louann Bailey Mailing Address 3060 Rainbow Ln		Date of Receipt
City Richfield	State Zip Code OH 44286	06 20 2014 Transaction ID : SA11AI.5879
FEC ID number of contributing federal political committee.	C 44200	Amount of Each Receipt this Period 20.00
Name of Employer Kent State University	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) C. Kevin Ballard		Date of Receipt
Mailing Address 10947 140th Ave NE		04 01 _2014 _
City Thief River Falls	State Zip Code MN 56701-8458	Transaction ID : SA11Al.6230 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer	Occupation	Contribution
Sanford Health Receipt For: Primary General	NP Aggregate Year-to-Date ▼	
Other (specify) ▼	370.00	
SUBTOTAL of Receipts This Page (optional	ıl) >	400.00
TOTAL This Period (last page this line num	nber only)	

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	the name and address of any political committee					
	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) A. Kevin Ballard		Date of Receipt				
Mailing Address 10947 140th Ave NE		04 28 _ 2014 _				
City	State Zip Code	Transaction ID : SA11AI.6231				
Thief River Falls	MN 56701-8458	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	300.00				
Name of Employer	Occupation	Contribution				
Sanford Health	NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	670.00					
Full Name (Last, First, Middle Initial) 3. Kevin Ballard		Date of Receipt				
Mailing Address 10947 140th Ave NE		M = M / D = D / Y = Y = Y				
City	State Zip Code	05 10 2014				
Thief River Falls	MN 56701-8458	Transaction ID : SA11AI.6232 Amount of Each Receipt this Period				
FEC ID number of contributing		7 thought of Each Fleedigt this Feriod				
federal political committee.	C	195.00				
Name of Employer	Occupation	Contribution				
Sanford Health	NP					
Receipt For:	Aggregate Year-to-Date ▼	_				
Primary General						
Other (specify) ▼	865.00					
Full Name (Last, First, Middle Initial) C. Kevin Ballard		Date of Receipt				
Mailing Address 10947 140th Ave NE		06 17 2014				
City	State Zip Code	Transaction ID : SA11AI.6233				
Thief River Falls	MN 56701-8458	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer	Occupation	Contribution				
Sanford Health	NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	965.00					
SUBTOTAL of Receipts This Page (optional) >	595.00				
TOTAL This Period (last page this line num	ber only)					

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	PAGE	•	11	OF		77					
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	13		14		15		16			17	

Full Name (Last, First, Middle Initial) Kevin Ballard Mailing Address 10947 140th Ave NE		Date of Receipt 06 19 2014				
City	State Zip Code	Transaction ID : SA11AI.6234				
Thief River Falls	MN 56701-8458	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer	Occupation	Contribution				
Sanford Health	NP					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 985.00					
Full Name (Last, First, Middle Initial) Kevin Ballard	•	Date of Receipt				
Mailing Address 10947 140th Ave NE		M = M / D = D / Y = Y = Y				
City	06 21 2014					
Thief River Falls	State Zip Code MN 56701-8458	Transaction ID : SA11AI.6235 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer	Occupation	Contribution				
Sanford Health	NP					
Receipt For:	Aggregate Year-to-Date ▼	†				
Primary General Other (specify) ▼	1085.00					
Full Name (Last, First, Middle Initial) Ronald Blaha	'	Date of Receipt				
Mailing Address 9211 Garland Rd #6430		05 25 2014				
City Dallas	State Zip Code TX 75218	Transaction ID : SA11Al.5886 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	1000.00				
Name of Employer	Occupation	Contribution				
Chiromassage Chiropractic	Chiro/Family NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	1000.00					

Use separate schedule(s) for each category of the Detailed Summary Page

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		13		14		15		16			17

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION C	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Lorraine Borrell Mailing Address 244 Serves Bu		Date of Receipt
Mailing Address 316 Sanrue Dr.		06 19 2014
City Johnstown	State Zip Code PA 15904	Transaction ID : SA11AI.5890
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 60.00
Name of Employer Windber Medical Center	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
Full Name (Last, First, Middle Initial) Lorraine Borrell Mailing Address 316 Sanrue Dr.	Date of Receipt 06 19 2014	
City Johnstown	State Zip Code PA 15904	Transaction ID : SA11AI.5891
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 5.00
Name of Employer Windber Medical Center	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) C. Lorraine Borrell		Date of Receipt
Mailing Address 316 Sanrue Dr.		06 19 2014 _
City Johnstown	State Zip Code PA 15904	Transaction ID : SA11AI.6281 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	140.00
Name of Employer Windber Medical Center	Occupation NP	In-kind - Raffle basket
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional).		205.00
TOTAL This Period (last page this line numb	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

	_	LINE	PAGE	 13	OF	77		
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Full Name (Last, First, Middle Initial) Anne Bradley Mailing Address 6986 Dove Creek Dr.		Date of Receipt 06 18 2014				
City	State Zip Code	Transaction ID : SA11AI.5894				
Wylie	TX 75098	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	100.00				
Name of Employer	Occupation	Contribution				
Collin Cty Community Health	NP					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 230.00					
Full Name (Last, First, Middle Initial) Andrea Brassard	'	Date of Receipt				
Mailing Address 4701 Ramsgate Ln.		M = M / D = D / Y = Y = Y = Y				
City	State Zip Code	05 10 2014 Transaction ID : SA11AI.5897				
Bowie	MD 20715-3216	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	130.00				
Name of Employer	Occupation	Contribution				
American Nurses Association	Health Policy Director					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00					
Full Name (Last, First, Middle Initial)	'					
. Andrea Brassard		Date of Receipt				
Mailing Address 4701 Ramsgate Ln. City	State Zip Code	06 12 2014				
Bowie	MD 20715-3216	Transaction ID : SA11AI.5898 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	15.00				
Name of Employer	Occupation	Contribution				
American Nurses Association	Health Policy Director					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	290.00					

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	PAGE		14	OF		77					
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	13		14		15		16			17	

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION (OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Andrea Brassard Mailing Address 4701 Ramsgate Ln.		Date of Receipt
City Bowie FEC ID number of contributing federal political committee. Name of Employer American Nurses Association Receipt For:	State Zip Code MD 20715-3216 C Occupation Health Policy Director Aggregate Year-to-Date ▼	Transaction ID : SA11AI.5899 Amount of Each Receipt this Period 20.00 Contribution
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	310.00	
Mailing Address 5924 Old Boyce Rd.		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Boyce FEC ID number of contributing federal political committee.	State Zip Code LA 71409	Transaction ID : SA11AI.5902 Amount of Each Receipt this Period 100.00
Name of Employer EmCare Inpatient Services Receipt For:	Occupation NP Aggregate Year-to-Date ▼	Contribution
Primary General Other (specify) ▼	230.00	
Full Name (Last, First, Middle Initial) Richard Brown Mailing Address 4924 Branch Mill Cir City	State Zip Code	Date of Receipt 05 15 2014 Transaction ID : SA11AI.5905
Mountain Brook FEC ID number of contributing federal political committee.	AL 35223-1606	Amount of Each Receipt this Period
Name of Employer Children's Hospital of Alabama Receipt For: Primary General Other (specify) ▼	Occupation NP Aggregate Year-to-Date ▼ 330.00	. Contribution
SUBTOTAL of Receipts This Page (optional)		250.00
TOTAL This Period (last page this line numb	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE	. ′	15	OF		77
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		13		14		15		16			17

or for commercial purposes, other than using t	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION C	F NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) A. Richard Brown		Date of Receipt
Mailing Address 4924 Branch Mill Cir		05 15 2014
City Mountain Brook	State Zip Code AL 35223-1606	Transaction ID : SA11AI.5906
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 25.00
Name of Employer Children's Hospital of Alabama Receipt For:	Occupation NP Aggregate Year-to-Date ▼	Contribution
Primary General Other (specify) ▼	355.00	
Full Name (Last, First, Middle Initial) Richard Brown Mailing Address 4924 Branch Mill Cir		Date of Receipt 05 21 2014
City	State Zip Code	Transaction ID : SA11AI.5907
Mountain Brook FEC ID number of contributing federal political committee.	AL 35223-1606	Amount of Each Receipt this Period
Name of Employer Children's Hospital of Alabama	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	
Full Name (Last, First, Middle Initial) C. Richard Brown		Date of Receipt
Mailing Address 4924 Branch Mill Cir		06 19 2014 _
City Mountain Brook	State Zip Code AL 35223-1606	Transaction ID : SA11AI.5908 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Children's Hospital of Alabama	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	
SUBTOTAL of Receipts This Page (optional).	•	140.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	OF NURSE PRACTITIONERS POI	LITICAL ACTION COMMITTEE
Theresa Brown		Date of Receipt
Mailing Address 1152 Rexford PI		06 19 2014
City	State Zip Code	Transaction ID : SA11AI.6253
Thousand Oaks	CA 91360	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	In-kind - Raffle basket
Interventional Cardiology Med	NP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	230.00	
Full Name (Last, First, Middle Initial) 3. Theresa Brown	•	Date of Receipt
Mailing Address 1152 Rexford PI		06 21 2014
City	State Zip Code	Transaction ID : SA11AI.5912
Thousand Oaks	CA 91360	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Contribution
Interventional Cardiology Med	NP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	330.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 107 Bob Jones Ct.		05 14 _ 2014 _
City	State Zip Code	Transaction ID : SA11AI.5915
Pottsboro	TX 75076	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	195.00
Name of Employer	Occupation	Contribution
Lake Texoma Health Clinic	APRN	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	215.00	
SUBTOTAL of Receipts This Page (optional	al)	345.00
TOTAL This Period (last page this line nun	nber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION (OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Bessie Burk		Date of Receipt
Mailing Address 9461 W. Hartigan Lane		05 09 2014
City	State Zip Code	Transaction ID : SA11AI.5918
Arizona City	AZ 85123	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	130.00
Name of Employer	Occupation	Contribution
Sunlife Family Health	FNP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) 3. Bessie Burk	·	Date of Receipt
Mailing Address 9461 W. Hartigan Lane		06 19 _ 2014 _
City	State Zip Code	Transaction ID : SA11AI.5919
Arizona City	AZ 85123	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.00
Name of Employer	Occupation	Contribution
Sunlife Family Health	FNP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 9461 W. Hartigan Lane		06 19 _ 2014 _
City	State Zip Code	Transaction ID : SA11AI.6258
Arizona City	AZ 85123	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	In-kind - Raffle basket
Sunlife Family Health	FNP	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	305.00	
SUBTOTAL of Receipts This Page (optional))	210.00
TOTAL This Period (last page this line number	ber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

	_		_	MBER	:	PAGE	 18	OF	77
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Full Name (Last, First, Middle Initial) Bessie Burk Mailing Address 9461 W. Hartigan Lane		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y				
City	State Zip Code	Transaction ID : SA11AI.5920				
Arizona City	AZ 85123	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer	Occupation	Contribution				
Sunlife Family Health	FNP					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 325.00					
Full Name (Last, First, Middle Initial) Bessie Burk		Date of Receipt				
Mailing Address 9461 W. Hartigan Lane		M = M / D = D / Y = Y = Y				
City	State Zip Code	06 21 2014 Transaction ID : \$A11 A1 5921				
Arizona City	AZ 85123	Transaction ID : SA11AI.5921 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	10.00				
Name of Employer Sunlife Family Health	Occupation FNP	Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00					
Full Name (Last, First, Middle Initial) Bessie Burk		Date of Receipt				
Mailing Address 9461 W. Hartigan Lane		06 21 2014				
City Arizona City	State Zip Code AZ 85123	Transaction ID : SA11AI.5922 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer	Occupation	Contribution				
Sunlife Family Health	FNP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	355.00					

	FOR LINE NUMBER:					_ ′	19	OF	77
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NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	to solicit contributions from such committee.
/	I OF NURSE PRACTITIONERS POI	THICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) A. Mary Cabral		Date of Receipt
Mailing Address 122 Mount Hope Ave.		06 21 2014
City	State Zip Code	Transaction ID : SA11AI.5926
Bristol	RI 02809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Contribution
Univ Surgical RI Colorectal	RNP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Melissa Christiansen	'	Date of Receipt
Mailing Address 26481 Conestoga Ct.		M = M / D = D / Y = Y = Y
City	State Zip Code	06 19 2014
Menifee	CA 92586-3457	Transaction ID : SA11AI.5929 Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Each receipt this renou
federal political committee.	C	300.00
Name of Employer	Occupation	Contribution
Riverside Medical Clinic	NP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	385.00	
Full Name (Last, First, Middle Initial) Melissa Christiansen		Date of Receipt
Mailing Address 26481 Conestoga Ct.		06 19 _ 2014 _
City	State Zip Code	Transaction ID : SA11AI.5930
Menifee	CA 92586-3457	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Contribution
Riverside Medical Clinic	NP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	405.00	
SUBTOTAL of Receipts This Page (option	nal)	420.00
, 337 (4444)	<u>· </u>	
TOTAL This Period (last page this line nu	mber only)	

Use separate schedule(s) for each category of the **Detailed Summary Page**

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	13	14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF NURSE PRACTITIONERS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Melissa Christiansen Date of Receipt Mailing Address 26481 Conestoga Ct. 21 2014 City State Zip Code Transaction ID: SA11AI.5931 CA Menifee 92586-3457 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Contribution Name of Employer Occupation Riverside Medical Clinic NP Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) Full Name (Last, First, Middle Initial) B. Heather Clinton Date of Receipt Mailing Address 316 County Road 3570 05 14 2014 City State Zip Code Transaction ID: SA11AI.5932 China Spring TX 76633 Amount of Each Receipt this Period FEC ID number of contributing 325.00 federal political committee. Contribution Name of Employer Occupation Lake Whitney Physicians **FNP** Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) c. Donna Coimbra-Emanu Date of Receipt Mailing Address 6428 Valmont St. 2014 06 18 City State Zip Code Transaction ID: SA11AI.5937 CA Tujunga 91042 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Contribution Name of Employer Occupation NP and Faculty Western Univ of Health Science Receipt For: Aggregate Year-to-Date ▼ Primary General 415.00 Other (specify) 595.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	g the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Donna Coimbra-Emanu		Date of Receipt
Mailing Address 6428 Valmont St.		06 21 2014
City	State Zip Code	Transaction ID : SA11AI.5938
Tujunga	CA 91042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Contribution
Western Univ of Health Science	NP and Faculty	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General Other (specify) ▼	515.00	
Full Name (Last, First, Middle Initial) 3. Cindy Cooke	ı	Date of Receipt
Mailing Address 5005 Red Mile Ct. SE		05 07 2014
City	State Zip Code	Transaction ID : SA11AI.5943
Brownsboro	AL 35741-9306	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	130.00
Name of Employer	Occupation	Contribution
U.S. Army	FNP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	
Full Name (Last, First, Middle Initial) C. Cindy Cooke	ı	Date of Receipt
Mailing Address 5005 Red Mile Ct. SE		06 21 2014
City	State Zip Code	Transaction ID : SA11AI.5944
Brownsboro	AL 35741-9306	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Contribution
U.S. Army	FNP	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	415.00	
SUBTOTAL of Receipts This Page (optional	il)	330.00
TOTAL This Period (last page this line num	nber only)	

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or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	the name and address of any political committee						
AMERICAN ASSOCIATION C	OF NURSE PRACTITIONERS POL	LITICAL ACTION COMMITTEE					
Full Name (Last, First, Middle Initial) Denise Coppa		Date of Receipt					
Mailing Address 224 Cole Dr.		06 21 2014					
City	State Zip Code	Transaction ID : SA11AI.5948					
North Kingstown	RI 02852	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	100.00						
Name of Employer	Occupation	Contribution					
University of Rhode Island	NP						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	205.00						
Full Name (Last, First, Middle Initial) 3. Joanne Cregg		Date of Receipt					
Mailing Address 22 Society Hill Way		05 14 2014					
City	Transaction ID : SA11AI.5952						
Tinton Falls	NJ 07724	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	195.00					
Name of Employer Memorial Sloan Kettering Cancr	Occupation NP	Contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00						
Full Name (Last, First, Middle Initial) 5. Joanne Cregg		Date of Receipt					
Mailing Address 22 Society Hill Way		06 19 2014					
City Tinton Falls	State Zip Code NJ 07724	Transaction ID : SA11AI.5954 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	20.00					
Name of Employer	Occupation	Contribution					
Memorial Sloan Kettering Cancr							
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	235.00						
SUBTOTAL of Receipts This Page (optional).	>	315.00					
TOTAL This Period (last page this line number							

FOR LINE NUMBER:						PAGE	: 2	23 ()F	77	
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	the name and address of any political committee							
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION (OF NURSE PRACTITIONERS POL	LITICAL ACTION COMMITTEE						
Full Name (Last, First, Middle Initial) A. Deidra Curry		Date of Receipt						
Mailing Address 3581 Woodgate Ct.								
City Wheatfield	State Zip Code IN 46392	Transaction ID : SA11AI.5958						
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period						
Name of Employer	Occupation	Contribution						
Minute Clinic	NP							
Receipt For:	Aggregate Year-to-Date ▼							
Primary General Other (specify) ▼	250.00							
Full Name (Last, First, Middle Initial) Deidra Curry	Date of Receipt							
Mailing Address 3581 Woodgate Ct.	06 21 2014							
City	Transaction ID : SA11AI.5959							
Wheatfield	State Zip Code IN 46392	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	40.00						
Name of Employer Minute Clinic	Occupation NP	Contribution						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00							
Full Name (Last, First, Middle Initial) C. Katherine Darling		Date of Receipt						
Mailing Address 637 Cougar Ln		05 10 2014						
City	State Zip Code	Transaction ID : SA11AI.5962						
Mountain Home	AR 72653-8878	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	65.00						
Name of Employer	Occupation	Contribution						
Independent Contractor								
Receipt For:	ceipt For: Aggregate Year-to-Date ▼							
Primary General Other (specify) ▼	215.00							
SUBTOTAL of Receipts This Page (optional)	····	205.00						
TOTAL This Period (last page this line numb	er only)							

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	13	14		15		16		17

1 1 7	ne name and address of any political committee						
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION O	F NURSE PRACTITIONERS POL	LITICAL ACTION COMMITTEE					
Full Name (Last, First, Middle Initial) Katherine Darling		Date of Receipt					
Mailing Address 637 Cougar Ln		06 01 2014					
City	State Zip Code	Transaction ID : SA11AI.5963					
Mountain Home	AR 72653-8878	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	ů – – – – – – – – – – – – – – – – – – –						
Name of Employer	Occupation	Contribution					
Independent Contractor	PMHNP						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	230.00						
Full Name (Last, First, Middle Initial) Hagit Deemer	Date of Receipt						
Mailing Address 7720 Blue Vail Way	05 19 2014						
City	Transaction ID : SA11AI.5964						
Colorado Springs	State Zip Code CO 80922	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	260.00					
Name of Employer Optum Health	Occupation NP	Contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00						
Full Name (Last, First, Middle Initial)		Date of Receipt					
Mailing Address 1780 Austin Ave.		06 20 2014					
City	State Zip Code	Transaction ID : SA11AI.5966					
Los Altos	CA 94024-6103	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	100.00					
Name of Employer	Occupation	Contribution					
Women Physicians							
Receipt For:	ceipt For: Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	350.00						
SUBTOTAL of Receipts This Page (optional)		375.00					
TOTAL This Period (last page this line number							

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE	: 2	25 OF		77
	(check only one)									
	×	11a		11b		11c		12		
		13		14		15		16		17

Full Name (Last, First, Middle Initial) Barbara Dehn Mailing Address 1780 Austin Ave.		Date of Receipt 06 21 2014					
City	State Zip Code	Transaction ID : SA11AI.5967					
Los Altos	CA 94024-6103	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	400.00					
Name of Employer	Occupation	Contribution					
Women Physicians	NP						
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 750.00						
Full Name (Last, First, Middle Initial) Kahlil Demonbreun	'	Date of Receipt					
Mailing Address 1020 Wedgewood Rd.		M = M / D = D / Y = Y = Y					
City	06 17 2014 Transportion ID : \$411AL 5059						
Orangeburg	State Zip Code SC 29118	Transaction ID : SA11AI.5968 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	500.00					
Name of Employer Med Univ of S Carolina	Occupation NP	Contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00						
Full Name (Last, First, Middle Initial)							
James Dickens		Date of Receipt					
Mailing Address 2717 Crater Lake Ln	Ohate 7ia Onda	05 05 2014					
City Denton	State Zip Code TX 76210-3378	Transaction ID : SA11AI.5972 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	100.00					
Name of Employer	Occupation	Contribution					
SNCH	CH NP						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	225.00						

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FOR LINE NUMBER:						PAGE	: 2	26	OF		77
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION O	F NURSE PRACTITIONERS POLI	TICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Sattaria Dilks		Date of Receipt
Mailing Address 1901 Rosedown Dr.		06 18 2014
City	State Zip Code	Transaction ID : SA11AI.5976
Lake Charles	LA 70605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	Contribution
Self-Employed	Psychiatric Mental Health NP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	230.00	
Full Name (Last, First, Middle Initial) 3. Sattaria Dilks		Date of Receipt
Mailing Address 1901 Rosedown Dr.		06 19 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.5977
Lake Charles	LA 70605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	115.00
Name of Employer	Occupation	Contribution
Self-Employed	Psychiatric Mental Health NP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	
Full Name (Last, First, Middle Initial) Suzanne Drake		Date of Receipt
Mailing Address 1100 Rahway Rd		04 03 2014
City	State Zip Code	Transaction ID : SA11AI.5980
Scotch Plains	NJ 07076	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer	Occupation	Contribution
The Wellness Group of NJ, LLC	Psychiatric Advanced Practice Nurse	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	220.00	
SUBTOTAL of Receipts This Page (optional)		265.00
TOTAL This Period (last page this line number	r only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION (OF NURSE PRACTITIONERS POLI	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) A. Suzanne Drake Mailing Address 1100 Rahway Rd		Date of Receipt
Mailing Address 1100 Rahway Rd City	06 19 2014 Transaction ID : SA11Al.5981	
Scotch Plains	State Zip Code NJ 07076	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Contribution
The Wellness Group of NJ, LLC	Psychiatric Advanced Practice Nurse	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	
Full Name (Last, First, Middle Initial) Mary Duggan		Date of Receipt
Mailing Address 11309 Hunt Farm Ln	0	06 19 2014
City Oakton	State Zip Code VA 22124	Transaction ID : SA11AI.6279
Oakton EEC ID number of contributing		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	135.00
Name of Employer Pulmonary & Critical Care Spec	Occupation	In-kind - Raffle basket
Receipt For:	NP	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	
Full Name (Last, First, Middle Initial) Cindy Edwards-Tuttle		Date of Receipt
Mailing Address 3617 Swallow Tail Ln.		04 03 2014
City Sylvania	State Zip Code OH 43560-3591	Transaction ID : SA11AI.5983 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Contribution
ProMedica	CNP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	220.00	
SUBTOTAL of Receipts This Page (optional)) >	255.00
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LIN	IE NUI	MBER:	PAGE	2	28	OF	77
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X 11a		11b	11c		12		
13		14	15		16		17

Full Name (Last, First, Middle Initial) Cindy Edwards-Tuttle Mailing Address 3617 Swallow Tail Ln.		Date of Receipt 05 08 2014
City	State Zip Code	Transaction ID : SA11AI.5984
Sylvania	OH 43560-3591	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	65.00
Name of Employer	Occupation	Contribution
ProMedica	CNP	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 285.00	
Full Name (Last, First, Middle Initial) Cindy Edwards-Tuttle	- 1	Date of Receipt
Mailing Address 3617 Swallow Tail Ln.		M = M / D = D / Y = Y = Y
City	State Zip Code	06 16 2014 Transportion ID - CA14 At 5005
Sylvania	OH 43560-3591	Transaction ID : SA11AI.5985
•		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Contribution
ProMedica	CNP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	
Full Name (Last, First, Middle Initial)	<u> </u>	2(2
Nancy England		Date of Receipt
Mailing Address 9044 N. Round Barn Rd		06 20 2014
City Williamsburg	State Zip Code IN 47393	Transaction ID : SA11AI.5990 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	200.00
Name of Employer	Occupation	Contribution
Pediatric and Internal Med	NP	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	285.00	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE	-	: PAGE	29 OF	77
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13	14	15	16	17

or for commercial purposes, other than using	ng the name and address of any political committee t	to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	I OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial) A. Patricia Farmer		Date of Receipt		
Mailing Address 8042 S. Big Sky Dr.		05 14 2014		
City Talala	State Zip Code OK 74080	Transaction ID : SA11AI.5995		
FEC ID number of contributing		Amount of Each Receipt this Period		
federal political committee.	C	65.00		
Name of Employer	Occupation	Contribution		
Pediatric Practitioners of OK	APRN-CNP			
Receipt For: Primary General	Aggregate Year-to-Date ▼			
Other (specify)	250.00			
Full Name (Last, First, Middle Initial) 3. Patricia Farmer		Date of Receipt		
Mailing Address 8042 S. Big Sky Dr.		06 18 2014		
City	State Zip Code	Transaction ID : SA11AI.5996		
Talala	OK 74080	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	100.00		
Name of Employer	Occupation	Contribution		
Pediatric Practitioners of OK Receipt For:	APRN-CNP	-		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial) C. Roger Fogg		Date of Receipt		
Mailing Address 8600 New Hope Rd.		06 19 _ 2014 _		
City	State Zip Code	Transaction ID : SA11AI.6259		
Grants Pass	OR 97527	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	103.00		
Name of Employer	Occupation	_ In-kind - Raffle basket		
Self-Employed	FNP			
Receipt For: Primary General	Aggregate Year-to-Date ▼			
Other (specify)	253.00			
SUBTOTAL of Receipts This Page (option	nal)	268.00		
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TOTAL This Period (last page this line nu	mber only)			

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LIN	E NUM	BER:	PAGE	3	0 OF	77
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Full Name (Last, First, Middle Initial) Rhonda Fountain Mailing Address 11601 W County Rd 100 N City	State Zip Code IN 47264	Date of Receipt Mark
Norman FEC ID number of contributing federal political committee. Name of Employer Brownstown Family Care Receipt For: Primary General Other (specify)	Occupation FNP Aggregate Year-to-Date ▼ 260.00	Amount of Each Receipt this Period 65.00 Contribution
Full Name (Last, First, Middle Initial) Rhonda Fountain Mailing Address 11601 W County Rd 100 N City Norman FEC ID number of contributing federal political committee. Name of Employer Brownstown Family Care Receipt For: Primary General Other (specify)	State Zip Code IN 47264 C Occupation FNP Aggregate Year-to-Date ▼ 280.00	Date of Receipt Mark
Full Name (Last, First, Middle Initial) Lana Fowler Mailing Address 7101 N. Belleview Ave City Kansas City FEC ID number of contributing federal political committee. Name of Employer Horizon Health Services Receipt For: Primary Other (specify)	State Zip Code MO 64118 C Occupation NP Aggregate Year-to-Date ▼	Date of Receipt 06 21 2014 Transaction ID: SA11AI.6003 Amount of Each Receipt this Period 100.00 Contribution

Use separate schedule(s) for each category of the Detailed Summary Page

	011 2012 110102				PAGE	= 3	31	OF	77
(che	ck only	or	ne)						
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Full Name (Last, First, Middle Initial) Nancy George Mailing Address 2108 Burns St		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11Al.6006
Detroit	MI 48214-2851	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	130.00
Name of Employer	Occupation	Contribution
Wayne State University	Assoc. Professor NP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) Katie Gilbert		Date of Receipt
Mailing Address PO Box 756		M = M / D = D / Y = Y = Y
City	State Zip Code	05 14 2014
Blessing	TX 77419	Transaction ID : SA11AI.6007
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer	Occupation	Contribution
Palacios Medical Clinic	FNP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Katie Gilbert		Date of Receipt
Mailing Address PO Box 756		05 19 _ 2014
City Blessing	State Zip Code TX 77419	Transaction ID : SA11AI.6009 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer	Occupation	Contribution
Palacios Medical Clinic	FNP	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	55 0	
Other (specify) ▼	390.00	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE		: PAGE	32 OF	77
(check only	one)			
X 11a	11b	11c	12	
13	14	15	16	17

Full Name (Last, First, Middle Initial) Angela Golden Mailing Address P.O. Box 25959		Date of Receipt 05 05 2014
City	State Zip Code	Transaction ID : SA11AI.6012
Munds Park	AZ 86017-5959	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	260.00
Name of Employer	Occupation	Contribution
NP from Home	NP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	
Full Name (Last, First, Middle Initial) Angela Golden		Date of Receipt
Mailing Address P.O. Box 25959		M M / D D / Y Y Y Y
City	State Zip Code	05 07 2014 Transaction ID - SA44AL 5043
Munds Park	AZ 86017-5959	Transaction ID : SA11AI.6013 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	520.00
Name of Employer NP from Home	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 925.00	
Full Name (Last, First, Middle Initial)		2
Angela Golden		Date of Receipt
Mailing Address P.O. Box 25959		06 17 2014
City Munds Park	State Zip Code AZ 86017-5959	Transaction ID : SA11AI.6014 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	165.00
Name of Employer	Occupation	Contribution
NP from Home	NP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1090.00	

Use separate schedule(s) for each category of the Detailed Summary Page

_	R LINE	_		:	PAGE	3	33 OF	77
(che	ck only	or	ne)					
×	11a		11b		11c		12	
	13		14		15		16	17

Full Name (Last, First, Middle Initial) Ilonda Griffee Mailing Address 1901 N Maize Rd		Date of Receipt 05 15 2014
City	State Zip Code	Transaction ID : SA11AI.6018
Wichita	KS 67212	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer	Occupation	Contribution
Ron Marek DO	NP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	
Full Name (Last, First, Middle Initial) Ilonda Griffee	'	Date of Receipt
Mailing Address 1901 N Maize Rd		M = M / D = D / Y = Y = Y
City	State Zip Code	05 15 2014
Wichita	KS 67212	Transaction ID : SA11AI.6019
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Contribution
Ron Marek DO	NP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	
Full Name (Last, First, Middle Initial) Ilonda Griffee		Data of Descint
		Date of Receipt
Mailing Address 1901 N Maize Rd		05 15 _2014 _
City	State Zip Code	Transaction ID : SA11AI.6020
Wichita	KS 67212	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer	Occupation	Contribution
Ron Marek DO	NP	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	55 5	
Other (specify) ▼	300.00	

_	FOR LINE NUMBER:				PAGE	: 3	34	OF	77
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	13	1	4		15		16		17

NAME OF COMMITTEE (In Full)	the name and address of any political committee	to solicit contributions from such committee.				
/	OF NURSE PRACTITIONERS POI	LITICAL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Ilonda Griffee	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address 1901 N Maize Rd						
City	Transaction ID : SA11AI.6021					
Wichita	KS 67212	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer	Occupation	Contribution				
Ron Marek DO	NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	400.00					
Full Name (Last, First, Middle Initial) 3. Ilonda Griffee	'	Date of Receipt				
Mailing Address 1901 N Maize Rd		06 19 2014				
City	State Zip Code	06 19 2014 Transaction ID : SA11AI.6022				
Wichita	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer	Occupation	Contribution				
Ron Marek DO	NP					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00					
Full Name (Last, First, Middle Initial)		Date of Receipt				
Mailing Address 1901 N Maize Rd	M = M / D = D / Y = Y = Y = Y = Y = 06 20 2014					
City	State Zip Code	Transaction ID : SA11AI.6023				
Wichita	KS 67212	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer	Contribution					
Ron Marek DO						
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	520.00					
SUBTOTAL of Receipts This Page (optional)	220.00				
TOTAL This Period (last page this line num	her only)					

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	FOR LINE NUMBER:					. 3	35 OF	77
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	13		14		15		16	17

or for commercial purposes, other than using	g the name and address of any political committee	to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE					
Full Name (Last, First, Middle Initial) Ilonda Griffee	Date of Receipt						
Mailing Address 1901 N Maize Rd		06 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Wichita	State Zip Code KS 67212	Transaction ID : SA11AI.6024					
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 20.00					
Name of Employer Ron Marek DO	Occupation NP	Contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00						
Full Name (Last, First, Middle Initial) C Hadden Mailing Address 165 Waddell Cir	•	Date of Receipt					
City	State Zip Code	06 21 2014 Transaction ID : SA11Al.6028					
Oak Ridge FEC ID number of contributing federal political committee.	TN 37830	Amount of Each Receipt this Period					
Name of Employer Free Medical Clinic Oak Ridge	Occupation NP	Contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00						
Full Name (Last, First, Middle Initial) C. Kassandra Harwood		Date of Receipt					
Mailing Address 6 Tyler Rd							
City Westford	State Zip Code MA 01886	Transaction ID : SA11Al.6035 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	195.00					
Name of Employer Rivier University	Contribution						
Rivier University Receipt For: Primary General Other (specify) ▼	NP Aggregate Year-to-Date ▼ 245.00						
SUBTOTAL of Receipts This Page (options	al) >	315.00					
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Use separate schedule(s) for each category of the Detailed Summary Page

	_					PAGE	: 3	36	OF	77
(c	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

Full Name (Last, First, Middle Initial) David Hebert Mailing Address 225 Reinekers Ln	Date of Receipt 05 13 2014					
Suite 525 City						
Alexandria	State Zip Code VA 22314-2880	Transaction ID : SA11AI.6037 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 65.00				
Name of Employer	Occupation	Contribution				
AANP	CEO					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00					
Full Name (Last, First, Middle Initial) David Hebert	'	Date of Receipt				
Mailing Address 225 Reinekers Ln		M = M / D = D / Y = Y = Y				
Suite 525 City	State Zip Code	06 19 2014				
Alexandria	VA 22314-2880	Transaction ID : SA11AI.6038 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	20.00 Contribution				
Name of Employer AANP	Occupation CEO					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 285.00					
Full Name (Last, First, Middle Initial) MEREDITH HEYDE	1	Date of Receipt				
Mailing Address 105 QUAIL RIDGE DR.		05 15 2014				
City SIMPSONVILLE	State Zip Code SC 29680	Transaction ID : SA11AI.6041 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	260.00				
Name of Employer	Contribution					
United Healthcare						
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	280.00					

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	: 3	37	OF	77		
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			13		14		15		16		17

		name and address of any political committee to	
\rangle	NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF	NURSE PRACTITIONERS POLIT	TICAL ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) MEREDITH HEYDE Mailing Address 105 QUAIL RIDGE DR. City SIMPSONVILLE FEC ID number of contributing federal political committee. Name of Employer United Healthcare Receipt For: Primary General Other (specify)	State Zip Code SC 29680 C Occupation NP Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / 2014 Transaction ID: SA11AI.6042 Amount of Each Receipt this Period 20.00 Contribution
В.	Full Name (Last, First, Middle Initial) MEREDITH HEYDE Mailing Address 105 QUAIL RIDGE DR.		Date of Receipt
	City SIMPSONVILLE FEC ID number of contributing federal political committee. Name of Employer United Healthcare Receipt For: Primary General Other (specify)	State Zip Code SC 29680 C Occupation NP Aggregate Year-to-Date ▼ 400.00	Transaction ID: SA11AI.6043 Amount of Each Receipt this Period 100.00 Contribution
c.	Full Name (Last, First, Middle Initial) Alisha Holbrook Mailing Address 6570 Heardsville Rd. City Cumming FEC ID number of contributing federal political committee. Name of Employer Gwinnett Emergency Associates Receipt For: Primary General Other (specify)	State Zip Code GA 30028 C Occupation NP Aggregate Year-to-Date ▼ 260.00	Date of Receipt M M M / 2014 Transaction ID: SA11Al.6048 Amount of Each Receipt this Period 260.00 Contribution
	SUBTOTAL This Period (lest page this line number of		380.00
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE		: PAGE	38 OF	77
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X 11a	11b	11c	12	
13	14	15	16	17

or for commercial purposes, other than using	g the name and address of any political committee t	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Marianne Hurley	Marianne Hurley					
Mailing Address 170 Silver Lake Ave.	05 09 <u>Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y</u>					
City Wakefield	State Zip Code RI 02879-4224	Transaction ID : SA11AI.6055 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	130.00				
Name of Employer Univ Medicine/Geriatrics	Occupation GNP/Faculty	Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00					
Full Name (Last, First, Middle Initial) Marianne Hurley Mailing Address 170 Silver Lake Ave.	·	Date of Receipt				
City Wakefield	State Zip Code RI 02879-4224	06 21 2014 Transaction ID : SA11AI.6056 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C C	100.00				
Name of Employer Univ Medicine/Geriatrics	Occupation GNP/Faculty	Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00					
Full Name (Last, First, Middle Initial) 2. Julia James		Date of Receipt				
Mailing Address PO Box 127 129 S. Main St.		06 19 2014				
City Clio	State Zip Code SC 29525-0127	Transaction ID : SA11AI.6241 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	40.00				
Name of Employer Marlboro Park Hospital	Occupation Family NP	Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00					
SUBTOTAL of Receipts This Page (optional	ıl)	270.00				
TOTAL This Period (last page this line num	nber only)					

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	= 3	39	OF		77
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X	11a		11b		11c		12			
	13		14		15		16			17

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) A. Julia James	Date of Receipt					
Mailing Address PO Box 127						
129 S. Main St.	06 20 2014					
City	State Zip Code	Transaction ID : SA11AI.6242				
Clio	SC 29525-0127	Amount of Each Receipt this Period				
EEC ID number of contribution		Amount of Edon Hooolpt tills I offor				
FEC ID number of contributing federal political committee.	C	40.00				
Name of Employer	Occupation	Contribution				
Marlboro Park Hospital	Family NP					
Receipt For:	Aggregate Year-to-Date ▼	1				
Primary General	Aggregate real-to-Date ₹					
Other (specify) ▼	580.00					
Full Name (Last, First, Middle Initial) 3. Julia James	-	Date of Receipt				
Mailing Address PO Box 127		M M / D D / Y Y Y Y				
129 S. Main St.		06 21 2014				
City	State Zip Code	Transaction ID : SA11AI.6243				
Clio	SC 29525-0127	Amount of Each Receipt this Period				
		our or East Hoodpt tills I criou				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer	Occupation	Contribution				
Marlboro Park Hospital	· ·					
Receipt For:	Family NP	-				
Primary General	Aggregate Year-to-Date ▼					
Other (specify)	680.00					
	1					
Full Name (Last, First, Middle Initial) Julia James		Date of Receipt				
Mailing Address PO Box 127		M = M / D = D / Y = Y = Y				
129 S. Main St.		06 21 2014				
City	State Zip Code	Transaction ID : SA11AI.6244				
Clio	SC 29525-0127	Amount of Each Receipt this Period				
FEC ID number of contributing		40.00				
federal political committee.	C	40.00				
Name of Employer	Occupation	Contribution				
Marlboro Park Hospital	Family NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General						
Other (specify) ▼	720.00					
SUBTOTAL of Receipts This Page (optional)	180.00				
TOTAL This Period (last page this line numl	per only)					

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE	_ 4	10 OF	77
	(che	ck only	or	ne)					
	×	11a		11b		11c		12	
		13		14		15		16	17

Full Name (Last, First, Middle Initial) Rhonda Jones Mailing Address 401 Winchester Dr.	Rhonda Jones				
City	State Zip Code	05 15 2014 Transaction ID : SA11Al.6062			
Savannah	GA 31410	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	260.00			
Name of Employer	Occupation	Contribution			
Fehr MD	FNP				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00				
Full Name (Last, First, Middle Initial) Michele Knappe		Date of Receipt			
Mailing Address 11320 S. Sawyer Ave.		M = M / D = D / Y = Y = Y			
City	State Zip Code	05 19 2014 Transaction ID : \$444 At 5057			
Chicago	IL 60655	Transaction ID : SA11AI.6067 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	65.00			
Name of Employer Team Health	Occupation	Contribution			
	NP	-			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00				
Full Name (Last, First, Middle Initial)	'	D. (D.)			
Michele Knappe		Date of Receipt			
Mailing Address 11320 S. Sawyer Ave.		06 07 2014			
City	State Zip Code	Transaction ID : SA11AI.6068			
Chicago	IL 60655	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	15.00			
Name of Employer	Occupation	Contribution			
Team Health	NP				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	230.00				

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)						PAGE	_ 4	11	OF	77
	(che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

or for commercial purposes, other than using	g the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) A. Michele Knappe	Date of Receipt	
Mailing Address 11320 S. Sawyer Ave.	06 17 2014	
City	State Zip Code IL 60655	Transaction ID : SA11AI.6069
Chicago		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	Contribution
Team Health	NP	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	245.00	
Full Name (Last, First, Middle Initial) 3. Joyce Knestrick	I	Date of Receipt
Mailing Address 801 Alamae Lakes Rd		M M / D D / Y Y Y Y
		05 07 2014
City	State Zip Code	Transaction ID : SA11AI.6074
Washington	PA 15301-9150	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.00
Name of Employer	Occupation	Contribution
Georgetown University	Associate Professor	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	220.00	
Full Name (Last, First, Middle Initial) C. Joyce Knestrick	'	Date of Receipt
Mailing Address 801 Alamae Lakes Rd		06 20 2014
City	State Zip Code	Transaction ID : SA11AI.6075
Washington	PA 15301-9150	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Contribution
Georgetown University	Associate Professor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
SUBTOTAL of Receipts This Page (optional	I)	55.00
	<u> </u>	
TOTAL This Period (last page this line num	nber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE		: PAGE	42 OF	77
(check only	one)			
X 11a	11b	11c	12	
13	14	15	16	17

or for commercial purposes, other than u	using the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATIO	ON OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Yvonne Krielow Mailing Address 7523 Highway 00	Date of Receipt	
Mailing Address 7533 Highway 90	05 30 2014	
City Roanoke	State Zip Code LA 70581	Transaction ID : SA11Al.6076 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer The Clinic of Welsh	Occupation FNP-BC	Contribution
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	-
Full Name (Last, First, Middle Initial) Michelle Lavery Mailing Address 11 Jennifer Cir		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code MA 01821	Transaction ID : SA11AI.6080
Billerica FEC ID number of contributing federal political committee.	MA 01821	Amount of Each Receipt this Period 260.00
Name of Employer Lahey Health	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	
Full Name (Last, First, Middle Initial) C. Nancy Lawton		Date of Receipt
Mailing Address 2289 NE 61st St.		05 30 2014
City Seattle	State Zip Code WA 98115-7016	Transaction ID : SA11AI.6082 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	Contribution
Neighborcare Health Greenwood Receipt For: □ Primary □ General □ Other (specify) ▼	FNP Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (opt	ional)	1010.00
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE		43	OF	77
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Nancy Lawton		Date of Receipt
Mailing Address 2289 NE 61st St.		06 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Seattle	State Zip Code WA 98115-7016	Transaction ID : SA11AI.6083 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer Neighborcare Health Greenwood	Occupation FNP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 515.00	
Full Name (Last, First, Middle Initial) Nancy Lawton Mailing Address 2220 NE 64ct St	Date of Receipt	
Mailing Address 2289 NE 61st St. City	06 17 2014 Transaction ID : SA11Al.6084	
Seattle	State Zip Code WA 98115-7016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Neighborcare Health Greenwood	Occupation FNP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1515.00	
Full Name (Last, First, Middle Initial) C. Lori Lioce	<u> </u>	Date of Receipt
Mailing Address 5803 Macon Dr. SE		05 21 2014
City Huntsville	State Zip Code AL 35802-1933	Transaction ID : SA11AI.6087 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer Univ of Alabama Huntsville	Occupation NP/Assoc. Professor	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	
SUBTOTAL of Receipts This Page (optional)	1080.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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	the name and address of any political committee						
	OF NURSE PRACTITIONERS PO	LITICAL ACTION COMMITTEE					
Full Name (Last, First, Middle Initial) Neva Lipscomb		Date of Receipt					
Mailing Address 853 Dubois Dr.		05 29 2014					
City	State Zip Code	Transaction ID : SA11AI.6090					
Baton Rouge	LA 70808	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	100.00					
Name of Employer	Occupation	853 Dubois Dr.					
Urgent Care & Family Medicine	FNP						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General							
Other (specify) ▼	250.00						
Full Name (Last, First, Middle Initial) 3. Lenora Lorenzo	,						
Mailing Address PO Box 474 62-394 JP Le	06 19 _2014 _						
City	State Zip Code	Transaction ID : SA11AI.6248					
Haleiwa	HI 96712-0474	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	200.00					
Name of Employer	In-kind - Raffle basket						
ER	NP						
Receipt For: Primary General	Aggregate Year-to-Date ▼						
Other (specify) ▼	370.00						
Full Name (Last, First, Middle Initial) Lenora Lorenzo	L	Date of Receipt					
Mailing Address PO Box 474 62-394 JP Le	eong Hw	06 20 _2014					
City	State Zip Code	Transaction ID : SA11AI.6250					
Haleiwa	HI 96712-0474	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	1100.00					
Name of Employer	Occupation	In-kind - Raffle One Week Condo					
ER	NP						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General							
Other (specify) ▼	1470.00						
SUBTOTAL of Receipts This Page (optional)	1400.00					
TOTAL This Period (last page this line num	ner only)						

Use separate schedule(s) for each category of the Detailed Summary Page

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Full Name (Last, First, Middle Initial) Miki Macdonald Mailing Address 57 Penobscot St.		Date of Receipt M = M / D = D / Y = Y = Y = Y				
City	State Zip Code	Transaction ID : SA11AI.6293				
Bangor	ME 04401	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	100.00				
Name of Employer	Occupation	Contribution				
St. Joseph Internal Medicine	NP					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00					
Full Name (Last, First, Middle Initial) George Mackel	'	Date of Receipt				
Mailing Address 298 Timbuktu Rd		M M / D D / Y Y Y Y				
City	06 19 2014 Transportion ID : \$444 At \$6004					
Sylva	State Zip Code NC 28779	Transaction ID : SA11AI.6091 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	1000.00				
Name of Employer Cherokee Indian Hospital	Occupation NP	853 Dubois Dr.				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00					
Full Name (Last, First, Middle Initial) Lori Martin-Plank		Data of Pagaint				
Mailing Address 90 Ervin Rd		Date of Receipt 04 03 2014				
City Pipersville	State Zip Code PA 18947	Transaction ID : SA11AI.6095 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer	Occupation	Contribution				
Ira Liebross Family Practice	FNP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	220.00					

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION C	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Alison Mcfadden Mailing Address 4122 Maryhill Dr.		Date of Receipt
City Cedar Falls FEC ID number of contributing federal political committee. Name of Employer Unity Point at Home Receipt For: Primary General	State Zip Code IA 50613 C Occupation NP Aggregate Year-to-Date ▼	Transaction ID : SA11Al.6098 Amount of Each Receipt this Period 20.00 Contribution
Other (specify) ▼ Full Name (Last, First, Middle Initial) Rick Meadows Mailing Address 7955 Ponca Rd	State Zin Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Colorado Springs FEC ID number of contributing federal political committee. Name of Employer AANP Certification Program Receipt For: Primary General Other (specify)	State Zip Code CO 80908 C Occupation Executive Director Aggregate Year-to-Date ▼	Transaction ID : SA11AI.6099 Amount of Each Receipt this Period 220.00 Contribution
Full Name (Last, First, Middle Initial) Andrew Metcalfe Mailing Address 605 Ridge St. City Sault Ste Marie	State Zip Code MI 49783	Date of Receipt M
FEC ID number of contributing federal political committee. Name of Employer Sault College Receipt For: Primary General Other (specify)	Occupation Student Aggregate Year-to-Date ▼ 325.00	Contribution
SUBTOTAL of Receipts This Page (optional)	>	370.00
TOTAL This Period (last page this line numb	er only)	

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and address of any political committee	to solicit contributions from such committee.				
/	OF NURSE PRACTITIONERS POL	LITICAL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) A. Rosalinda Morales		Date of Receipt				
Mailing Address 11805 Meadowglen Ln		05 05 2014				
City	State Zip Code	Transaction ID : SA11AI.6105				
Houston	TX 77082-2778	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	200.00				
Name of Employer	Occupation	Contribution				
MEDVAMC-Katy OP Clinic	NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	320.00					
Full Name (Last, First, Middle Initial) 3. Rosalinda Morales	1	Date of Receipt				
Mailing Address 11805 Meadowglen Ln	M = M / D = D / Y = Y = Y					
City	05					
Houston	State Zip Code TX 77082-2778	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	65.00				
Name of Employer MEDVAMC-Katy OP Clinic	Occupation NP	Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00					
Full Name (Last, First, Middle Initial) C. Rosalinda Morales	'	Date of Receipt				
Mailing Address 11805 Meadowglen Ln		06 18 2014				
City	State Zip Code	Transaction ID : SA11AI.6107				
Houston	TX 77082-2778	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	180.00				
Name of Employer	Occupation	Contribution				
MEDVAMC-Katy OP Clinic	NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	565.00					
SUBTOTAL of Receipts This Page (optional	al)	445.00				
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FOTAL This Period (last page this line nun	nber only)					

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE		18 OF	=	77
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or for commercial purposes, other than using t	the name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION C	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) A. Rosalinda Morales		Date of Receipt				
Mailing Address 11805 Meadowglen Ln		06 23 2014 Transaction ID : SA11AI.6108 Amount of Each Receipt this Period				
City Houston	State Zip Code TX 77082-2778					
FEC ID number of contributing federal political committee.	С	100.00				
Name of Employer MEDVAMC-Katy OP Clinic	Occupation NP	Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00					
Full Name (Last, First, Middle Initial) Nancy O'Rourke Mailing Address 55 Truell Rd.		Date of Receipt 05 20 2014				
City Hollis	State Zip Code NH 03049	Transaction ID : SA11AI.6117 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	130.00				
Name of Employer Steward Medical	Occupation NP	Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00					
Full Name (Last, First, Middle Initial) C. Nancy O'Rourke		Date of Receipt				
Mailing Address 55 Truell Rd.		06 20 2014 _				
City Hollis	State Zip Code NH 03049	Transaction ID : SA11Al.6118 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer Steward Medical	Occupation NP	Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
SUBTOTAL of Receipts This Page (optional).		250.00				
TOTAL This Period (last page this line number	er only)					

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	g the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Deborah Onken		Date of Receipt
Mailing Address 26853 Cold Springs St		04 03 2014
City	State Zip Code	Transaction ID : SA11AI.6113
Calabasas Hills	CA 91301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Contribution
Kaiser Permanente	Geriatric NP	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	220.00	
Full Name (Last, First, Middle Initial) 3. Diane Padden		Date of Receipt
Mailing Address 7049 River Oak Ct.		05 07 2014
City	State Zip Code	Transaction ID : SA11AI.6121
Clarksville	MD 21029	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	130.00
Name of Employer	Occupation	Contribution
AANP	VP of Research & Education	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) C. Diane Padden	·	Date of Receipt
Mailing Address 7049 River Oak Ct.		05 14 2014
City	State Zip Code	Transaction ID : SA11AI.6122
Clarksville	MD 21029	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer	Occupation	Contribution
AANP	VP of Research & Education	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General		
Other (specify) ▼	285.00	
SUBTOTAL of Receipts This Page (optional	1)	295.00
TOTAL This Period (last page this line num	ber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

		LINE	_		:	PAGE	: 5	50	OF	77
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	the name and address of any political committee					
	F NURSE PRACTITIONERS POL	LITICAL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Sharyl Page	Sharyl Page					
Mailing Address 921 Bennett St.		06 20 / Y Y Y Y Y Y				
City	State Zip Code	Transaction ID : SA11AI.6125				
Jackson	MS 49202	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer	Contribution					
Dr. Jones Practice	NP					
Receipt For:	Aggregate Year-to-Date ▼	-				
Primary General	Aggregate real-to-Date ▼					
Other (specify) ▼	295.00					
Full Name (Last, First, Middle Initial) 3. Sharyl Page		Date of Receipt				
Mailing Address 921 Bennett St.		06 21 _2014 _				
City	State Zip Code	Transaction ID : SA11AI.6126				
Jackson	MS 49202	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	20.00				
Name of Employer	Occupation	Contribution				
Dr. Jones Practice	NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	315.00					
Full Name (Last, First, Middle Initial) Cynthia Paschal-Pulliam		Date of Receipt				
Mailing Address 9485 Hunt Club Trl NE		04 08 2014				
City	State Zip Code	Transaction ID : SA11AI.6127				
Warren	OH 44484	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer	Occupation	Contribution				
Psycare, Inc.	NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	250.00					
SUBTOTAL of Receipts This Page (optional).		370.00				
TOTAL This Period (last page this line number						

Use separate schedule(s) for each category of the Detailed Summary Page

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	X	11a		11b		11c	12		
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Name of Employer Veterans Administration Receipt For: Primary General Other (specify) ▼		ne name and address of any political committee to					
Mailing Address 11201 Woodmar Ln NE City	AMERICAN ASSOCIATION O	F NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE				
City State Zip Code Albuquerque NM 87111 FEC ID number of contributing federal political committee. Name of Employer Veterans Administration Receipt For: Primary General Other (specify) ▼ 250.00 Full Name (Last, First, Middle Initial) City State Zip Code Prittsburgh PA 15212 Name of Employer Hilltop Community Health Care Hilltop Community Health Care Primary General Other (specify) ▼ 220.00 Full Name (Last, First, Middle Initial) State Zip Code Prittsburgh PA 15212 FEC ID number of contributing federal political committee. Name of Employer Hilltop Community Health Care Primary General Other (specify) ▼ 220.00 Full Name (Last, First, Middle Initial) State Zip Code Primary General Other (specify) ▼ 220.00 Full Name (Last, First, Middle Initial) State Zip Code Primary General Other (specify) ▼ 220.00 Full Name (Last, First, Middle Initial) State Zip Code Primary General Other (specify) ▼ 220.00 Full Name (Last, First, Middle Initial) Fec ID number of contributing federal political committee. Mailing Address 3878 Brighton Rd City State Zip Code Primary General Other (specify) ▼ 220.00 Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Contribution Contribution Contribution Contribution FEC ID number of contributing federal political committee. Name of Employer Occupation No Contribution Contribution Contribution Contribution							
City Albuquerque NM 87111 FEC ID number of contributing federal political committee. Name of Employer Veterans Administration Receipt For: Primary	Mailing Address 11201 Woodmar Ln NE	Mailing Address 11201 Woodmar Ln NE					
FEC ID number of contributing federal political committee. Name of Employer Veterans Administration Receipt For: Primary General Other (specify) ▼ City State Zip Code PA 15212 Full Name (Last, First, Middle Initial) City State Zip Code Phitsburgh Receipt For: Primary General Other (specify) ▼ Coccupation NP Receipt For: Primary General Other (specify) ▼ Coccupation NP Receipt For: Primary General Other (specify) ▼ Coccupation NP Receipt For: Primary General Other (specify) ▼ Coccupation NP Receipt For: Primary General Other (specify) ▼ Contribution Date of Receipt Transaction ID: SA11AL6133 Amount of Each Receipt this Period Contribution Date of Receipt Transaction ID: SA11AL6133 Amount of Each Receipt this Period Contribution Date of Receipt Transaction ID: SA11AL6134 Amount of Each Receipt this Period Contribution Date of Receipt Transaction ID: SA11AL6134 Amount of Each Receipt this Period Contribution Pal 15212 Date of Receipt this Period Contribution	City						
Name of Employer Occupation NP	Albuquerque	NM 87111	Amount of Each Receipt this Period				
Name of Employer Veterans Administration Receipt For: Primary General Other (specify) ▼ Paggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt Transaction ID : SA11Al.6133 Amount of Each Receipt this Period Receipt For: Primary General City State Zip Code PA 15212 FEC ID number of contributing federal political committee. Name of Employer Hilltop Community Health Care Primary General Other (specify) ▼ Primary General City State Zip Code Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt this Period Contribution Date of Receipt this Period Transaction ID : SA11Al.6133 Amount of Each Receipt this Period Date of Receipt Transaction ID : SA11Al.6133 Amount of Each Receipt this Period Date of Receipt Date of Receipt Transaction ID : SA11Al.6134 Amount of Each Receipt this Period Date of Receipt Date of Receipt Transaction ID : SA11Al.6134 Amount of Each Receipt this Period Contribution Contribution	3	C	150.00				
Receipt For:	Name of Employer	Occupation	In-kind - Raffle basket				
Primary General Other (specify) ▼ 250.00 Full Name (Last, First, Middle Initial) Lorraine Reiser Mailing Address 3878 Brighton Rd City State Zip Code PA 15212 FEC ID number of contributing federal political committee. Name of Employer Hilltop Community Health Care Receipt From: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Contribution FUIL Name (Last, First, Middle Initial) Lorraine Reiser Mailing Address 3878 Brighton Rd City State Zip Code PA 15212 For ID number of contributing federal political committee. City State Zip Code PA 15212 FILL Name (Last, First, Middle Initial) City State Zip Code PA 15212 FILL Name (Last, First, Middle Initial) City State Zip Code PA 15212 FEC ID number of contributing federal political committee. Name of Employer Occupation	Veterans Administration	NP					
Other (specify) ▼ 250.00 Full Name (Last, First, Middle Initial) Lorraine Reiser Mailing Address 3878 Brighton Rd City State Zip Code PA 15212 FEC ID number of contributing federal political committee. Name of Employer Hiltop Community Health Care Primary General Other (specify) ▼ 220.00 Full Name (Last, First, Middle Initial) Lorraine Reiser Mailing Address 3878 Brighton Rd City State Zip Code PA 15212 Date of Receipt Transaction ID: SA11Al.6133 Amount of Each Receipt this Period Contribution Date of Receipt Transaction ID: SA11Al.6133 Amount of Each Receipt this Period Contribution Date of Receipt Transaction ID: SA11Al.6133 Amount of Each Receipt this Period Contribution Full Name (Last, First, Middle Initial) Lorraine Reiser Mailing Address 3878 Brighton Rd City State Zip Code PA 15212 Fec ID number of contributing federal political committee. Name of Employer Occupation		Aggregate Year-to-Date ▼					
Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) City State Zip Code Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) City State Zip Code Primary General Other (specify) ▼ Full Name of Employer Mailing Address 3878 Brighton Rd City State Zip Code PA 15212 Aggregate Year-to-Date ▼ Date of Receipt Transaction ID : SA11Al.6133 Amount of Each Receipt this Period Contribution Contribution Date of Receipt Transaction ID : SA11Al.6133 Amount of Each Receipt this Period Contribution Date of Receipt Transaction ID : SA11Al.6134 Amount of Each Receipt Transaction ID : SA11Al.6134 Amount of Each Receipt Transaction ID : SA11Al.6134 Amount of Each Receipt this Period City State Zip Code PA 15212 FEC ID number of contributing federal political committee. Name of Employer Occupation							
City State Zip Code Pittsburgh PA 15212 Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) City State Zip Code PA 15212 Contribution FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) City State Zip Code Pittsburgh PA 15212 FEC ID number of contributing federal political committee. Name of Employer Contribution Date of Receipt Transaction ID : SA11Al.6134 Amount of Each Receipt this Period Transaction ID : SA11Al.6134 Amount of Each Receipt this Period City State Zip Code PA 15212 FEC ID number of contributing federal political committee. Name of Employer Contribution			Date of Receipt				
City State PA Zip Code PA Transaction ID : SA11Al.6133 Pittsburgh PA 15212 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 85. Name of Employer Hilltop Community Health Care Receipt For:	Mailing Address 3878 Brighton Rd						
FEC ID number of contributing federal political committee. Name of Employer Hilltop Community Health Care NP Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Lorraine Reiser Mailing Address 3878 Brighton Rd City State Zip Code PA 15212 FEC ID number of contributing federal political committee. Name of Employer Occupation NP Date of Receipt Transaction ID: SA11Al.6134 Amount of Each Receipt this Period Contribution Contribution Contribution	City	State Zip Code					
Receipt For: Primary General Other (specify) ▼	Pittsburgh	PA 15212	Amount of Each Receipt this Period				
Hilltop Community Health Care Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Lorraine Reiser Mailing Address 3878 Brighton Rd City State Zip Code Pittsburgh FEC ID number of contributing federal political committee. Name of Employer Occupation	· ·	C	85.00				
Primary General Other (specify) ▼ Paggregate real-to-bate ▼ 220.00 Date of Receipt Date of Receipt Mailing Address 3878 Brighton Rd City State Zip Code Pittsburgh PA 15212 FEC ID number of contributing federal political committee. Name of Employer Occupation Poccupation Contribution	, ,	'	Contribution				
City State Zip Code Transaction ID: SA11Al.6134 Pittsburgh PA 15212 Name of Employer Occupation Date of Receipt Date of Receipt Date of Receipt Date of Receipt Transaction ID: SA11Al.6134 Amount of Each Receipt this Period Contribution	Primary General						
Mailing Address 3878 Brighton Rd City State Zip Code Transaction ID: SA11AI.6134 Pittsburgh PA 15212 FEC ID number of contributing federal political committee. Name of Employer Occupation Contribution			Date of Receipt				
City State Zip Code Transaction ID : SA11AI.6134 Pittsburgh PA 15212 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 120. Name of Employer Occupation			M = M / D = D / Y = Y = Y				
Pittsburgh PA 15212 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Amount of Each Receipt this Period Contribution	City	State Zip Code					
federal political committee. Name of Employer Occupation Contribution	Pittsburgh	PA 15212					
Name of Employer Occupation	3	C	120.00				
	Name of Employer	Occupation	Contribution				
	Hilltop Community Health Care	NP					
Receipt For: Aggregate Year-to-Date ▼	·	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼ 340.00		340.00					
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		355.00				
TOTAL This Period (last page this line number only)		<u> </u>					

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION (OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Rebecca Rigolosi Mailing Address 100 Grand Cove Ways 4d-s City Edgewater FEC ID number of contributing federal political committee. Name of Employer Holy Name Medical Center Receipt For: Primary General Other (specify)	State Zip Code NJ 07020 C Occupation NP Aggregate Year-to-Date ▼ 255.00	Date of Receipt Date of Receipt
Full Name (Last, First, Middle Initial) Angela Ritten Mailing Address PO Box 725 City Sorrento FEC ID number of contributing federal political committee. Name of Employer UCF Receipt For: Primary General Other (specify)	State Zip Code FL 32776 C Occupation ARNP Aggregate Year-to-Date ▼ 325.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Angela Ritten Mailing Address PO Box 725 City Sorrento FEC ID number of contributing federal political committee. Name of Employer UCF Receipt For: Primary General Other (specify)	State Zip Code FL 32776 C Occupation ARNP Aggregate Year-to-Date ▼ 365.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	>	560.00
TOTAL This Period (last page this line numb	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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Full Name (Last, First, Middle Initial) Terry Sampson Mailing Address 3605 Smoothstone Dr.		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City	State Zip Code	Transaction ID : SA11AI.6143
Plano	TX 75074	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	130.00
Name of Employer	Occupation	- Contribution
City of Garland	FNP	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) Candace Sandal	,	Date of Receipt
Mailing Address 210 Hull Ave		M = M / D = D / Y = Y = Y
Harmony Hills City	State Zip Code	05 14 2014
Newark	DE 19711	Transaction ID : SA11AI.6144
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 260.00
Name of Employer Dow	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Eileen Santoro		Date of Receipt
Mailing Address 25 Underwood Dr.		05 14 2014
City Saratoga Springs	State Zip Code NY 12866	Transaction ID : SA11AI.6148 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	260.00
Name of Employer	Occupation	Contribution
Saratoga	FNP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE	NUMBER	: PAGE	54 OF	77
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Full Name (Last, First, Middle Initial) Deborah Scheurell Mailing Address 452 S. Leaf Ave.	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y	
City	State Zip Code	Transaction ID : SA11AI.6152
West Covina	CA 91791-2521	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Contribution
Molina Medical Groups	NP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) Deborah Scheurell	1	Date of Receipt
Mailing Address 452 S. Leaf Ave.		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	06 21 2014 Transaction ID : \$4114 6153
West Covina	CA 91791-2521	Transaction ID : SA11AI.6153 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Molina Medical Groups	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
Full Name (Last, First, Middle Initial)		Date of Descipt
LORNA SCHUMANN Mailing Address 18275 W. QUAIL LN		Date of Receipt 06 19 2014
City POST FALLS	State Zip Code ID 83854-6755	Transaction ID : SA11AI.6156 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Contribution
WASHINGTON STATE UNIV	Professor, School of Nursing	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	220.00	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	LINE	NU	MBER	:	PAGE	: 5	55 OF	77
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION O	F NURSE PRACTITIONERS POLI	TICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Vanessa Seal		Date of Receipt
Mailing Address 1968 Thomas Circle		05 14 2014
City	State Zip Code	Transaction ID : SA11Al.6161
Placentia	CA 92870	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Contribution
Barlow Respiratory Hospital	Nurse	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) General	215.00	
Full Name (Last, First, Middle Initial) 3. Janet Selway		Date of Receipt
Mailing Address 1718 Hunter Mill Rd		05 10 Y 2014
City	State Zip Code	Transaction ID : SA11AI.6163
White Hall	MD 21161	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer	Occupation	Contribution
Catholic University	Asst. Professor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 445.00	
Full Name (Last, First, Middle Initial) . Janet Selway		Date of Receipt
Mailing Address 1718 Hunter Mill Rd		06 17 2014
City White Hall	State Zip Code MD 21161	Transaction ID : SA11Al.6164 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	Contribution
Catholic University	Asst. Professor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	485.00	
SUBTOTAL of Receipts This Page (optional)	····	385.00
TOTAL This Period (last page this line numbe	<u> </u>	

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or for commercial purposes, other than using the	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION O	F NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) A. Janet Selway		Date of Receipt
Mailing Address 1718 Hunter Mill Rd		06 17 2014
City White Hall	State Zip Code MD 21161	Transaction ID : SA11Al.6165 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer Catholic University	Occupation Asst. Professor	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) 3. Janet Selway Mailing Address 1718 Hunter Mill Rd		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City White Hall	State Zip Code MD 21161	Transaction ID : SA11AI.6166 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer Catholic University	Occupation Asst. Professor	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	
Full Name (Last, First, Middle Initial) C. Janet Selway		Date of Receipt
Mailing Address 1718 Hunter Mill Rd		06 19 2014 _
City White Hall	State Zip Code MD 21161	Transaction ID : SA11Al.6167 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Catholic University	Occupation Asst. Professor	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 645.00	
SUBTOTAL of Receipts This Page (optional)		160.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

_	LINE	_		:	PAGE	 57 OF	77
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Full Name (Last, First, Middle Initial) Janet Selway Mailing Address 1718 Hunter Mill Rd	anet Selway ailing Address 1718 Hunter Mill Rd						
City	State Zip Code	06 20 2014 Transaction ID : SA11AI.6168					
White Hall	MD 21161	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	20.00					
Name of Employer	Occupation	Contribution					
Catholic University	Asst. Professor						
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 665.00						
Full Name (Last, First, Middle Initial) Janet Selway	'	Date of Receipt					
Mailing Address 1718 Hunter Mill Rd		M = M / D = D / Y = Y = Y					
City	State Zip Code	06 21 2014					
White Hall	MD 21161	Transaction ID : SA11AI.6169					
		Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	20.00					
Name of Employer	Occupation	Contribution					
Catholic University	Asst. Professor						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 685.00						
Full Name (Last, First, Middle Initial) Janet Selway	I	Data of Recoint					
Mailing Address 1718 Hunter Mill Rd		Date of Receipt 06 21 2014					
City White Hall	State Zip Code MD 21161	Transaction ID : SA11Al.6170 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	40.00					
Name of Employer	Occupation	Contribution					
Catholic University	Asst. Professor						
Receipt For:	Aggregate Year-to-Date ▼	1					
Primary General							
Other (specify) ▼	725.00						

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	LINE	NU	MBER	:	PAGE	: 5	58 OF	77
(che	ck only	or	ne)					
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Full Name (Last, First, Middle Initial) Drema Servoss Mailing Address 1701 Tall Pine Circle		Date of Receipt M = M / D = D / Y = Y = Y = Y D = D D D D D D D D D
City	State Zip Code	Transaction ID : SA11AI.6171
Safety Harbor	FL 34695	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	325.00
Name of Employer	Occupation	Contribution
Long Term Care Assessments	ARNP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Sarah Sherr	•	Date of Receipt
Mailing Address 18 W. Beechwood Ave.		M = M / D = D / Y = Y = Y
City	State Zip Code	05 14 2014
Oaklyn	NJ 08107	Transaction ID : SA11AI.6173 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	260.00
Name of Employer Temple Univ Student Health	Occupation NP	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Susan Smith	'	Date of Receipt
Mailing Address 474 Windsor PI		06 18 2014
City Oceanside	State Zip Code NY 11572	Transaction ID : SA11AI.6177 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Contribution
Prohealthcare Assoc	NP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	275.00	

Use separate schedule(s) for each category of the Detailed Summary Page

FOF	TOTAL MOMBERS				PAGE	 59	OF	77
(che	ck only	or	ne)					
X	11a		11b		11c	12		
	13		14		15	16		17

Full Name (Last, First, Middle Initial) Tabitha Smith Mailing Address 36 Dogwood Circle	Date of Receipt 06 18 2014	
City	State Zip Code	Transaction ID : SA11AI.6178
Woodbury	TN 37190	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	Contribution
Self-Employed	NP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Patsy Smyth	·	Date of Receipt
Mailing Address 1017 3rd Ave. N.		M = M / D = D / Y = Y = Y
City	State Zip Code	06 19 2014 Transaction ID + SA44AL 6480
Columbus	MS 39701	Transaction ID : SA11AI.6180 Amount of Each Receipt this Period
		Amount of Each neceipt this refloo
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	Contribution
Self-Employed	NP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)	'	Date of Bearing
Jo Sturgeon		Date of Receipt
Mailing Address 18219 W. Running Sprin	ngs ka.	06 18 _2014 _
City	State Zip Code	Transaction ID : SA11AI.6184
Park Hill	OK 74451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Contribution
Sturgeon Family Nurse	NP	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	55 5	
Other (specify)	275.00	

Use separate schedule(s) for each category of the Detailed Summary Page

		LINE	_		:	PAGE	. 6	60	OF	77
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Full Name (Last, First, Middle Initial) Michelle Taylor Mailing Address 1958 SW Panther Trce	Michelle Taylor Mailing Address 1958 SW Panther Trce							
City	State Zip Code	06 04 2014 Transaction ID : SA11Al.6187						
Stuart	FL 34997-4849	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	250.00						
Name of Employer	Occupation	Contribution						
Martin Health System	NP							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00							
Full Name (Last, First, Middle Initial) Deborah Varnam	·	Date of Receipt						
Mailing Address P.O. Box 422		M = M / D = D / Y = Y = Y						
City	State Zip Code	05 19 2014 Transaction ID : \$41141 6189						
Shallotte	NC 28459-0422	Transaction ID : SA11AI.6189 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	20.00						
Name of Employer Varnam Family Wellness Ctr LLC	Occupation FNP	Contribution						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00							
Full Name (Last, First, Middle Initial) Deborah Varnam		Date of Receipt						
Mailing Address P.O. Box 422		06 19 2014						
City Shallotte	State Zip Code NC 28459-0422	Transaction ID : SA11AI.6190 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	240.00						
Name of Employer	Occupation	Contribution						
Varnam Family Wellness Ctr LLC	FNP							
Receipt For: Primary General	Aggregate Year-to-Date ▼							
Other (specify) ▼	455.00							

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINI	NUMBER	: PAGE	61 OF	77				
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Full Name (Last, First, Middle Initial) Deborah Wachtel Mailing Address 286 Brigham Hill Rd.		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City	State Zip Code	Transaction ID : SA11AI.6193
Essex Junction	VT 05452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer	Occupation	Contribution
Central Vermont Endocrinology	NP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Deborah Wachtel		Date of Receipt
Mailing Address 286 Brigham Hill Rd.		M = M / D = D / Y = Y = Y
City	State Zip Code	06
Essex Junction	VT 05452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	68.00
Name of Employer Central Vermont Endocrinology	Occupation NP	In-kind - Raffle basket
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00	
Full Name (Last, First, Middle Initial) Nancy Whitehead	'	Date of Descript
Mailing Address 743 S. 7th Ave.		Date of Receipt 06 20 2014
City West Bend	State Zip Code WI 53095	Transaction ID : SA11AI.6199 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Contribution
Whitehead Consulting, LLC	NP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	220.00	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	: (62	OF	77	
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and address of any political committee	to solicit contributions from such committee.				
Full Name (Last, First, Middle Initial)	OF NURSE PRACTITIONERS POI	LITICAL ACTION COMMITTEE				
Nancy Whitehead	Date of Receipt					
Mailing Address 743 S. 7th Ave.		06 20 2014				
City	State Zip Code	Transaction ID : SA11AI.6200				
West Bend	WI 53095	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	40.00				
Name of Employer	Occupation	Contribution				
Whitehead Consulting, LLC	NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	260.00					
Full Name (Last, First, Middle Initial) 3. Michele Wilkinson	<u>'</u>	Date of Receipt				
Mailing Address 1916 Eastmoreland Ave.	Mailing Address 1916 Eastmoreland Ave.					
City	State Zip Code	06 21 2014				
Rockford	IL 61108	Transaction ID : SA11AI.6204				
	C	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	100.00					
Name of Employer	Occupation	Contribution				
Centegra Health System	NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	250.00					
Full Name (Last, First, Middle Initial) Michele Wilkinson		Date of Receipt				
Mailing Address 1916 Eastmoreland Ave.		06 21 _2014 _				
City	State Zip Code	Transaction ID : SA11AI.6205				
Rockford	IL 61108	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer	Occupation	Contribution				
Centegra Health System	NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	270.00					
SUBTOTAL of Receipts This Page (optiona	I)	160.00				
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE		: PAGE	63 OF	77					
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13	14	15	16	17					

or for commercial purposes, other than using	g the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION	OF NURSE PRACTITIONERS POL	ITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Christine Williams		Date of Receipt
Mailing Address 15701 Fernway Rd		04 282014
City	State Zip Code	Transaction ID : SA11AI.6209
Shaker Heights	OH 44120	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Contribution
Neighborhood Family Practice	FNP	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) 3. Christine Williams		Date of Receipt
Mailing Address 15701 Fernway Rd		05 12 2014
City	State Zip Code	Transaction ID : SA11AI.6210
Shaker Heights	OH 44120	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer	Occupation	Contribution
Neighborhood Family Practice	FNP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) C. Mary Wilson	'	Date of Receipt
Mailing Address 1443 Spyglass Hill Dr.		05 15 2014
City	State Zip Code	Transaction ID : SA11AI.6211
Brunswick	OH 44212	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	260.00
Name of Employer	Occupation	Contribution
Avery Dennison	NP	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	260.00	
SUBTOTAL of Receipts This Page (optional	il)	425.00
TOTAL This Period (last page this line num	nber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	: (64	OF	77		
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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION C	F NURSE PRACTITIONERS POL	TICAL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) A. Heidi Wold						
Mailing Address 4015 Water Park Ct		05 22 2014				
City						
Riverview	FL 33578	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer	Occupation	Contribution				
Walgreens	Chief NP					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	250.00					
Full Name (Last, First, Middle Initial) 3. Jennifer Worsley	Date of Receipt					
Mailing Address 2703 80th St. E	05 14 2014					
City Tacoma	State Zip Code WA 98404	Transaction ID : SA11AI.6215				
	V/A 90404	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	260.00				
Name of Employer	Occupation	2703 80th St. E				
Franciscan Health System	FNP Student/RN					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00					
Full Name (Last, First, Middle Initial) Jennifer Worsley		Date of Receipt				
Mailing Address 2703 80th St. E		06 19 2014				
City	State Zip Code	Transaction ID : SA11AI.6217				
Tacoma	WA 98404	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.00				
Name of Employer	Occupation	2703 80th St. E				
Franciscan Health System	FNP Student/RN					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	280.00					
SUBTOTAL of Receipts This Page (optional).		530.00				
TOTAL This Period (last page this line number	er only)					

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In AMERICAN ASSOC	Full) CIATION OF NURSE PRACTITIONERS POI	LITICAL ACTION COMMITTEE
Full Name (Last, First, Middl Nancy Zaner	e Initial)	Date of Receipt
Mailing Address 1402 E. Hub	oach Hill Dr.	05 21 2014
City Raymore	State Zip Code MO 64083-9485	Transaction ID : SA11AI.6219 Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.	C	390.00
Name of Employer Take Care Health Systems, L	Occupation LC Regional Vice President FNP	Contribution
Receipt For: Primary Gene Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Nancy Zaner		Date of Receipt
Mailing Address 1402 E. Hub City	State Zip Code	06 21 2014 Transaction ID : SA11AI.6220
Raymore	MO 64083-9485	Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.	C	300.00
Name of Employer Take Care Health Systems, Li	Occupation LC Regional Vice President FNP	Contribution
Receipt For: Primary Gene Other (specify) ▼	Aggregate Year-to-Date ▼ 835.00	
Full Name (Last, First, Middl	e Initial)	Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.	C	
Name of Employer	Occupation	
Receipt For: Primary Gene Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This F	Page (optional)	690.00
TOTAL This Period (last page	this line number only)	26056.00

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	AMERICAN ASSOCIATION OF NU	IRSE DRACTITIONI	ERS	: D	\sim L I	TI	$\cap \Delta 1$	۸۲	ידור	IA	COM	N/IT7		
	AMERICAN ASSOCIATION OF INC	INSE FINACTITION	LINC) [OLI	11'	CAL	Α(,,,,	/IN	COIVI	IVIIII	СС	
	Full Name (Last, First, Middle Initial)													
Α.	Lenora Lorenzo						Date o	f Dis	sburse	mer	nt			
	Mailing Address DOD 474 00 004 IDI						M M	/		D	/ Y	Y Y	Y	
	Mailing Address PO Box 474 62-394 JP Leong Hw						06		2	U		2014	_	
	City	State Zip Code					_			-	2045.00			
	Haleiwa	HI 96712-0474					Irans	act	ion ID	: 51	321B.62	/5		
	Purpose of Disbursement In-kind - Raffle One Week Condo						A			D:-1			D	1
	Candidate Name						Amoun	τοτ	⊨acn	DISI	ourseme	nt this	Perio)a
	Carradate Name		Cate	egor /pe	′y/							110	0.00	
	Office Sought: House Disbursen	nent For:	.,	700					,					
	Senate	Primary General												
		Other (specify) ▼												
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В.	Full Name (Last, First, Middle Initial)						Date o	f Dis	sburse	mer	nt			
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	Mailing Address]	Ĺ.		i L.			
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	City State Zip Code													
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	Candidate Name												П	
	Office Sought: House Disbursen	ant For	Туре						7		- 7	_		
		Primary General												
		Other (specify) ▼												
	State: District:													
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	Category/ Type								,		- 7		-	
	Office Sought: House Disbursen													
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SCHEDULE B (FEC Form 3X)		EOD LINE	UMBER: PAGE 67 OF 77						
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	INGIVIBEIT.						
TI ENVILLE DISDOTISEIVILIAIS	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26						
	Detailed Suffillidity Page	27	28a 28b 28c 29 30b						
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NAME OF COMMITTEE (In Full)									
$ \; angle$ AMERICAN ASSOCIATION OF NU	JRSE PRACTITION	ERS POLI	TICAL ACTION COMMITTEE						
V Supplies the state of the sta		-							
Full Name (Last, First, Middle Initial)			Date of Disbursement						
A. BEN CARDIN FOR SENATE									
Mailing Address P.O. BOX 21093			05 13 2014						
5 11212012.000									
•	State Zip Code		Transaction ID : SB23.5784						
0,11011212	MD 21228		11a115aCtiOi1 ID . 3D23.3784						
Purpose of Disbursement Contribution			Amount of Each Dishurson and this David						
Candidate Name		السبا	Amount of Each Disbursement this Period						
Candidate Name		Category/ Type	1000.00						
Office Sought: House Disbursen	nent For: 2014	i ype							
	Primary General								
	Other (specify) ▼								
State: MD District: 03									
Full Name (Last, First, Middle Initial)									
B. BENNET FOR COLORADO			Date of Disbursement						
			M M / D D / Y Y Y Y						
Mailing Address PO BOX 3078			06 09 2014						
City	State Zip Code								
•	CO 80201		Transaction ID: SB23.5837						
Purpose of Disbursement									
Contribution			Amount of Each Disbursement this Period						
Candidate Name		Category/	1000.00						
MICHAEL F BENNET	ant Fore sois	Туре	1000.00						
	nent For: 2016 Primary General								
	Other (specify)								
State: CO District: 00	Canon (opcomy)								
Full Name (Last, First, Middle Initial)									
C. CHUCK FLEISCHMANN FOR CON	IGRESS COMMITT	FF. INC	Date of Disbursement						
		,	M M / D D / Y Y Y Y						
Mailing Address P.O. BOX 11091			05 27 2014						
01	N-1- 7' 0 '								
,	State Zip Code TN 37401		Transaction ID : SB23.5831						
Purpose of Disbursement	3/401								
Contribution			Amount of Each Disbursement this Period						
Candidate Name		Category/							
CHARLES J FLEISCHMANN		Type	500.00						
	nent For: 2014		,						
	Primary General								
	Other (specify) ▼								
State: TN District: 03									
QUIDTOTAL ACRIM			2500.00						
SUBTOTAL of Disbursements This Page (optional)		······	2000.00						
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SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 68 OF 77
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
AMERICAN ASSOCIATION OF NU	JRSE PRACTITIONI	ERS POLI	TICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)			Date of Disbursement
A. COFFMAN FOR CONGRESS			M M / D D / Y Y Y Y
Mailing Address 4950 S YOSEMITE STREET F2 #5	11		05 13 2014
,	State Zip Code		Transaction ID : SB23.5798
GREENWOOD VILLAGE Purpose of Disbursement	CO 80111		
Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
MIKE COFFMAN Office Sought:	nent For: 2014	Туре	1000.00
	Primary General		
	Other (specify)		
State: CO District: 07			
Full Name (Last, First, Middle Initial) B. COLLINS FOR SENATOR			Date of Disbursement
B. COLLINS FOR SENATOR			M M / D D / Y Y Y Y
Mailing Address PO BOX 1096			05 19 2014
BANGOR	State Zip Code ME 04402		Transaction ID : SB23.5816
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
SUSAN M COLLINS	. =	Type	1000.00
	nent For: 2014 Primary General		
	Other (specify)		
State: ME District: 00			
Full Name (Last, First, Middle Initial)			Data of Dishuwaamant
c. FRIENDS FOR JIM MCDERMOTT			Date of Disbursement
Mailing Address PO BOX 21786			05 05 2014
,	state Zip Code WA 98111		Transaction ID : SB23.5770
Purpose of Disbursement Contribution			
Candidate Name		Category/	Amount of Each Disbursement this Period 2500.00
Office Sought:	nent For: 2014	Туре	
	Primary General		
	Other (specify) ▼		
State: WA District: 07			
SUBTOTAL of Disbursements This Page (optional)		······•	4500.00
1			

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S	CHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 69 OF 77
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
		Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Ar	ry information copied from such Reports and Staten	l nents may not be sold or u		
	for commercial purposes, other than using the name			
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	AMERICAN ASSOCIATION OF NU	JRSE PRACTITION	NERS POLI	TICAL ACTION COMMITTEE
<u></u>	Full Name (Last, First, Middle Initial)			
A.	FRIENDS OF JACK KINGSTON			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address PO BOX 2133			05 05 2014
	City	State Zip Code		
	SAVANNAH	GA 31402		Transaction ID : SB23.6321
	Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
	Candidate Name		011	Amount of Each disbursement this Period
			Category/ Type	1000.00
		nent For: 2014		
		Primary General		
	State: GA District: 11	Other (specify) ▼		
_	Full Name (Last, First, Middle Initial)			
В.	FRIENDS OF LOIS CAPPS			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address P.O. BOX 23940			05 19 2014
	,	State Zip Code CA 93121		Transaction ID : SB23.5807
	SANTA BARBARA Purpose of Disbursement	CA 93121		
	Contribution			Amount of Each Disbursement this Period
	Candidate Name		Category/	1000.00
	LOIS G CAPPS Office Sought:	nent For: 2014	Туре	1000.00
		Primary General		
		Other (specify) ▼		
	State: CA District: 24			
	Full Name (Last, First, Middle Initial)			
Ċ.	FRIENDS OF LOIS CAPPS			Date of Disbursement
	Mailing Address P.O. BOX 23940			05 27 2014
	,	State Zip Code CA 93121		Transaction ID : SB23.5822
	Purpose of Disbursement	33121		
	Contribution			Amount of Each Disbursement this Period
	Candidate Name Cat			1500.00
	LOIS G CAPPS Office Sought:	nent For: 2014	Туре	1000.00
		Primary General		
		Other (specify) ▼		
	State: CA District: 24	<u> </u>		
Г				2500.00
S	UBTOTAL of Disbursements This Page (optional)		·····•	3500.00
П	OTAL This Period (last page this line number only)			
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SCI	HEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 70 OF 77						
	MIZED DISBURSEMENTS	Use separate schedule(s	(check only	NONE I I						
	WILLS SIGSOFIGEIVILIATO	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26						
		Dotailed Guillinary Fage	27	28a 28b 28c 29 30b						
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I \	AME OF COMMITTEE (In Full)	IDOE DD ACTITICS	JEDO BOL	TIO A L. A OTION LOOK !! !!						
	AMERICAN ASSOCIATION OF NU	JRSE PRACTITIO	NERS POLI	FICAL ACTION COMMITTEE						
<u>/</u> F	ull Name (Last, First, Middle Initial)									
_	FRIENDS OF MARY LANDRIEU, I	NC.		Date of Disbursement						
_		-		M M / D D / Y Y Y Y						
M	ailing Address 700 13TH STREET NW			04 01 2014						
_	SUITE 600	State Zip Code								
	/ASHINGTON	DC 20005		Transaction ID : SB23.6312						
P	urpose of Disbursement									
	Void Check #1519		011	Amount of Each Disbursement this Period						
C	andidate Name		Category/	-1000.00						
_	ffice Sought: House Disbursen	nont For: 2014	Туре	1000.00						
U		nent For: 2014 Primary General								
		Other (specify)								
S	tate: LA District: 00	V 1 = = 37 - ▼								
F	ull Name (Last, First, Middle Initial)									
B. F	FRIENDS OF MARY LANDRIEU, I	NC.		Date of Disbursement						
_				M M / D D / Y Y Y Y						
M	lailing Address 700 13TH STREET NW SUITE 600			04 15 2014						
c		State Zip Code		T						
٧	/ASHINGTON	DC 20005		Transaction ID : SB23.5757						
	urpose of Disbursement Contribution			Amount of Food Bill						
	andidate Name			Amount of Each Disbursement this Period						
C	andidate Manie		Category/ Type	1000.00						
ō	ffice Sought: House Disbursen	nent For: 2014	1300							
		Primary General								
	President	Other (specify) ▼								
	tate: LA District: 00									
_	ull Name (Last, First, Middle Initial)			Date of Dishaus and						
U. (GREAT LAND PAC			Date of Disbursement						
	ailing Address 700 13TH STREET, NW			05 13 2014						
	SUITE 600									
C	,	State Zip Code		Transaction ID : SB23.5792						
	/ASHINGTON urpose of Disbursement	DC 20005								
	urpose of Disbursement Contribution			Amount of Foot Distriction 1911 D. 1						
C	andidate Name		Cotogo	Amount of Each Disbursement this Period						
-	MARK BEGICH		Category/ Type	1000.00						
Ō	ffice Sought: House Disbursen	nent For: 2014								
		Primary General								
_		Other (specify) ▼								
s	tate: AK District: 00									
	RTOTAL of Disburgamenta This Dags (antistral)		_	1000.00						
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SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 71 OF 77					
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	Detailed Summary Page	27	28a 28b 28c 29 30b					
Any information copied from such Reports and St.	atements may not be sold or u	ised by any nerse	on for the purpose of soliciting contributions					
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NAME OF COMMITTEE (In Full)								
AMERICAN ASSOCIATION OF	NURSE PRACTITIO	NERS POLI	TICAL ACTION COMMITTEE					
/								
Full Name (Last, First, Middle Initial)								
A. HEARTLAND VALUES PAC			Date of Disbursement					
Molling Address BC 5			M M / D D / Y Y Y Y					
Mailing Address PO BOX 505			04 08 2014					
City	State Zip Code							
SIOUX FALLS	SD 57101		Transaction ID: SB23.5754					
Purpose of Disbursement	3.101							
Contribution			Amount of Each Disbursement this Period					
Candidate Name		Category/	2000.00					
JOHN R THUNE		Type	3500.00					
	rsement For: 2014							
Senate President	Primary General							
State: SD District: 00	Other (specify) ▼							
Full Name (Last, First, Middle Initial) B. IMPACT			Date of Disbursement					
- IIVIFAUI								
Mailing Address 192 LEXINGTON AVE.			05 19 2014					
SUITE 1001								
City	State Zip Code		Transaction ID : SB23.5819					
NEW YORK	NY 10016							
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period					
Candidate Name		السيا	Amount of Lacif Dispulsement this Period					
CHARLES E SCHUMER		Category/ Type	5000.00					
	rsement For: 2014	1,900						
Senate	Primary General							
President	Other (specify) ▼							
State: NY District: 00								
Full Name (Last, First, Middle Initial)								
C. JOHNSON FOR CONGRESS			Date of Disbursement					
			M M / D D / Y Y Y Y					
Mailing Address PO BOX 14496			05 19 2014					
City	State Zip Code							
POLAND	OH 44514		Transaction ID : SB23.5813					
Purpose of Disbursement								
Contribution			Amount of Each Disbursement this Period					
Candidate Name		Category/	1000.00					
BILL JOHNSON	· -	Туре	1000.00					
	rsement For: 2014							
Senate President	Primary General							
State: OH District: 06	Other (specify) ▼							
State: OH District: 06								
SURTOTAL of Dishuramenta This Dane (anti-	al)	-	9500.00					
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SCHEDULE B (FEC Form 3X)		FOR LINE	NE NUMBER: PAGE 72 OF 77							
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NAME OF COMMITTEE (In Full) AMERICAN ASSOCIATION OF N	URSE PRACTITION	IERS POLI	TICAL ACTION COMMITTEE							
Full Name (Last, First, Middle Initial)			Data of Dishursament							
A. LOBIONDO FOR CONGRESS Mailing Address P. O. BOX 550			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City	State Zip Code									
VINELAND	NJ 08362		Transaction ID: SB23.5825							
Purpose of Disbursement Contribution		· · · ·	Amount of Each Disbursement this Period							
Candidate Name FRANK A. LOBIONDO		Category/ Type	1000.00							
Senate President	ment For: 2014 Primary General Other (specify) ▼									
State: NJ District: 02										
Full Name (Last, First, Middle Initial) B. LYNN JENKINS FOR CONGRESS	5		Date of Disbursement							
Mailing Address PO BOX 1441			05 05 2014							
TOPEKA	State Zip Code KS 66601		Transaction ID : SB23.6329							
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period							
Candidate Name		Category/ Type	1000.00							
Office Sought: House Disbursel	nent For: 2014 Primary General Other (specify)									
Full Name (Last, First, Middle Initial)										
c. MAKING AMERICA PROSPEROL	IS PAC		Date of Disbursement							
Mailing Address PO BOX 2485			05 05 2014							
SPRINGFIELD	State Zip Code VA 22152		Transaction ID : SB23.6323							
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period								
Candidate Name KEVIN BRADY		Category/ Type	5000.00							
Office Sought: House Senate President Disburser	nent For: 2014 Primary General Other (specify)	7,77								
State: TX District: 08										
SUBTOTAL of Disbursements This Page (optional)		·····	7000.00							
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SCHEDULE B (FEC Form 3X)		EOD LINE	INE NUMBER: PAGE 73 OF 77							
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or for commercial purposes, other than using the	name and address of any poli	tical committee to	solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)			TIO 41 A OTIONI O ON 41 41 TTEE							
AMERICAN ASSOCIATION OF	NURSE PRACTITIO	NERS POLI	TICAL ACTION COMMITTEE							
Full Name (Last, First, Middle Initial)										
A. PAT ROBERTS FOR US SENA	ΓΕ INC		Date of Disbursement							
			M M / D D / Y Y Y Y							
Mailing Address PO BOX 433			05 13 2014							
City	State Zip Code									
GREAT BEND	KS 67530		Transaction ID : SB23.6332							
Purpose of Disbursement										
Contribution			Amount of Each Disbursement this Period							
Candidate Name		Category/	3000.00							
Office Sought: House Disbut	sement For: 2014	Туре	7							
∑ Senate	Primary General									
President	Other (specify)									
State: KS District: 00										
Full Name (Last, First, Middle Initial)										
B. PAT ROBERTS FOR US SENA	TE INC		Date of Disbursement							
Mailing Address PO BOX 433			06 09 2014							
Maining Address FO BOX 455			2017							
City	State Zip Code		Transaction ID : SB23.5834							
GREAT BEND	KS 67530		Transaction 15 : 0520.0004							
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period							
Candidate Name		Category/								
PAT ROBERTS		Type	1000.00							
	sement For: 2014									
Senate	Primary General									
State: KS District: 00	Other (specify) ▼									
Full Name (Last, First, Middle Initial)										
C. PAT ROBERTS FOR US SENA	TE INC		Date of Disbursement							
			M = M / D = D / Y = Y = Y							
Mailing Address PO BOX 433			06 09 2014							
City	State Zip Code									
GREAT BEND	KS 67530		Transaction ID : SB23.5840							
Purpose of Disbursement										
Contribution			Amount of Each Disbursement this Period							
Candidate Name		Category/	1000.00							
PAT ROBERTS Office Sought: House Disbut	sement For: 2014	Туре								
Senate	Primary General									
President	Other (specify) ▼									
State: KS District: 00	· 									
SUBTOTAL of Disbursements This Page (options	d)	•••••••••••••••••••••••••••••••••••••••	5000.00							
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 74 OF 77						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	NOMBER:						
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Any information copied from such Reports and Staten									
or for commercial purposes, other than using the nam	e and address of any politic	al committee to	solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)			TICAL ACTION COMMITTEE						
$ \hspace{.05cm} angle$ AMERICAN ASSOCIATION OF NU	JRSE PRACTITION	ERS POLI	TICAL ACTION COMMITTEE						
Full Name (Last, First, Middle Initial)									
A. PEOPLE FOR BEN			Date of Disbursement						
M 111 A L L			M M / D D / Y Y Y Y						
Mailing Address PO BOX 31129			05 19 2014						
City	State Zip Code								
G/ =	NM 87594		Transaction ID : SB23.5810						
Purpose of Disbursement Contribution			Assessed of Early Disharmon and this Buried						
Candidate Name			Amount of Each Disbursement this Period						
BEN R MR. LUJAN		Category/ Type	1000.00						
	nent For: 2014	1,700	, , , , , , , , , , , , , , , , , , , ,						
Senate	Primary General								
President	Other (specify) ▼								
State: NM District: 03 Full Name (Last, First, Middle Initial)									
B. PEOPLE FOR PATTY MURRAY			Date of Disbursement						
I LOI LE I OKTATTI MORKAT			M M / D D / Y Y Y Y						
Mailing Address PO BOX 3662			05 13 2014						
City	State Zip Code								
SEATTLE	WA 98124		Transaction ID : SB23.5804						
Purpose of Disbursement Contribution			Assessment of Early Dichemony and this Boried						
Candidate Name			Amount of Each Disbursement this Period						
PATTY MURRAY		Category/ Type	1000.00						
	nent For: 2014	- 7 -	, ,						
	Primary General								
	Other (specify) ▼								
State: WA District: 00									
Full Name (Last, First, Middle Initial) C. RON BARBER FOR CONGRESS			Date of Disbursement						
TON BANBERT OR CONGRESS			M M / D D / Y Y Y Y						
Mailing Address PO BOX 57715			04 15 2014						
City	No. 1								
,	State Zip Code AZ 85732		Transaction ID: SB23.5760						
Purpose of Disbursement									
Contribution			Amount of Each Disbursement this Period						
Candidate Name		Category/	1000.00						
Office Sought:	nent For: 2014	Туре	, , , , , ,						
	Primary General								
President	Other (specify) ▼								
State: AZ District: 02									
			3000.00						
SUBTOTAL of Disbursements This Page (optional)		·····	3000.00						
TOTAL This Period (last page this line number only)									

SCHEDULE B (FEC Form 3X)		FOR LINE	INE NUMBER: PAGE 75 OF 77						
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBER.						
	for each category of the Detailed Summary Page	21b	22 🗶 23 🔲 24 🔲 25 🖂 26						
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NAME OF COMMITTEE (In Full)	e and address of any poiling	a committee to	SOURCE CONTINUED TO THE SUCH CONTINUED.						
AMERICAN ASSOCIATION OF NU	IRSE PRACTITION	IFRS POLI	TICAL ACTION COMMITTEE						
	ANDE I NACITION	LING I OLI	TIONE NOTION COMMITTEE						
Full Name (Last, First, Middle Initial)									
A. RYAN FOR CONGRESS, INC.			Date of Disbursement						
Mailing Address PO BOX 1488			05 13 2014						
maining realises 1 8 BOX 1400			30 10 2011						
,	State Zip Code		Transaction ID : SB23.5788						
JANESVILLE Purpose of Disbursement	WI 53547								
Contribution			Amount of Each Disbursement this Period						
Candidate Name		Category/							
		Type	1000.00						
	nent For: 2014								
Senate President	Primary General Other (specify)								
State: WI District: 01	Outer (Specify)								
Full Name (Last, First, Middle Initial)									
B. TITUS FOR CONGRESS			Date of Disbursement						
			05 13 2014						
Mailing Address PO BOX 72454	Mailing Address PO BOX 72454								
City	City State Zip Code								
LAS VEGAS	NV 89170		Transaction ID : SB23.5801						
Purpose of Disbursement Contribution			Assessed of Feel Pick						
Candidate Name			Amount of Each Disbursement this Period						
DINA TITUS		Category/ Type	1000.00						
	nent For: 2014	.,,,,	, , , , , , , , , , , , , , , , , , , ,						
	Primary General								
	Other (specify) ▼								
State: NV District: 01									
Full Name (Last, First, Middle Initial) C. TOM REED FOR CONGRESS			Date of Disbursement						
			M M / D D / Y Y Y Y						
Mailing Address PO BOX 391			05 27 2014						
City	No. 1								
,	State Zip Code NY 14456		Transaction ID: SB23.5828						
Purpose of Disbursement	1.55								
Contribution			Amount of Each Disbursement this Period						
Candidate Name THOMAS W II REED		Category/	1000.00						
	nent For: 2014	Туре							
	Primary General								
President	Other (specify) ▼								
State: NY District: 23									
			3000.00						
SUBTOTAL of Disbursements This Page (optional)		·····•	3000.00						
TOTAL This Period (last page this line number only)									

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S	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE		R·			PAGE	76	OF 77		
ΙT	EMIZED DISBURSEMENTS	Use separate schedule(s)	\ I	(check only one)								
		for each category of the Detailed Summary Page		21b		22	×			24	25	26
_					27	28	а	28b		28c	29	30b
	ny information copied from such Reports and Statem											
or	for commercial purposes, other than using the name	e and address of any politi	icai cor	nmiti	ee to	SOIICIT	contri	butions	s tro	m sucn	commi	πee.
$ \rangle$	NAME OF COMMITTEE (In Full)		UEDG	ם פ	Οl 1.		ι Λ	CTIC	146	\sim	\ <i>1</i> 11	
/	AMERICAN ASSOCIATION OF NU	JRSE PRACTITION	NERS	5 P	OLI	IICA	LA	CIIC	אוכ	COM	IVII I	
_	Full Name (Last, First, Middle Initial)											
A.	UPTON FOR ALL OF US					Date	of D	isburs	emei	nt		
					-	M M / D D / Y Y Y Y						
	Mailing Address P.O. BOX 490					0	5		3		2014	
	City	State Zip Code			_							
	ST. JOSEPH	MI 49085				Tra	nsac	tion ID) : SI	B23.578	1	
	Purpose of Disbursement Contribution			-								
	• • • • • • • • • • • • • • • • • • • •					Amo	unt o	f Each	Dis	burseme	nt this	Period
	Candidate Name			egor	y/						100	0.00
	Office Sought:	nent For: 2014	ı	ype				7		-,		
		Primary General										
	President	Other (specify) ▼										
	State: MI District: 06											
_	Full Name (Last, First, Middle Initial)											
В.	VOLUNTEERS FOR SHIMKUS					Date of Disbursement						
	Mailing Address PO BOX 661				-	M 0	м 4		21	/ Y	2014	Y
	Maining / Marcoss PO BOX 001					L V					2017	
	•	State Zip Code				Tra	nsac	tion IE) : S	B23.576	3	
	COLLINSVILLE Purpose of Disbursement	IL 62234										
	Contribution					Amount of Each Disbursement this Period						
	Candidate Name		Cat	egor								
				ype	y'			7			150	00.00
		nent For: 2014										
		Primary General										
	President State: IL District: 15	Other (specify) ▼										
_	Full Name (Last, First, Middle Initial)											
C.	Tail Name (East, 1 list, Middle Illian)					Date	of D	isburs	emei	nt		
						M	M	/ D	D	/ Y	Y Y	Y
	Mailing Address					L		L				
	City	State Zip Code										
	City	state Zip Code										
	Purpose of Disbursement			-	_							
			L.			Amo	unt o	f Each	Dis	burseme	nt this	Period
	Candidate Name			egor	y/							
	Office Sought: House Disbursen	nent For:	Т	уре			_	7	_	7		
		Primary General										
		Other (specify) ▼										
	State: District:											
Г	<u> </u>						-	_		-		
s	UBTOTAL of Disbursements This Page (optional)				•			7	_	-	250	0.00
	OTAL This David (Issues and Issues and Issue							-			4150	0.00
ΙŢ	OTAL This Period (last page this line number only)						-	-				

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 77 OF 77	
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBETT.	
II LIVIIZED DISDUNSEIVIEN IS	for each category of the Detailed Summary Page	21b	22 23 24 25 26	
	Detailed Summary Page	27	28a 28b 28c X 29 30b	
Any information copied from such Reports and State	ments may not be sold or us	sed by any nerse		
or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				
AMERICAN ASSOCIATION OF N	URSE PRACTITION	IERS POLI	TICAL ACTION COMMITTEE	
Full Name (Last, First, Middle Initial)				
A. Cynthia Devine			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address 3 Harcrest Ct.			04 28 2014	
City	State Zip Code			
Dover	DE 19901		Transaction ID : SB29.5848	
Purpose of Disbursement	10001			
Proceeds from Raffle		003	Amount of Each Disbursement this Period	
Candidate Name		Category/		
		Type	737.50	
	ment For:			
Senate	Primary General			
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial) B.			Date of Disbursement	
.			M M / D D / Y Y Y Y	
Mailing Address			W - W / D - D / T - T - T - T	
ŭ				
City	State Zip Code			
Dumana of Dishumanant				
Purpose of Disbursement			Amount of Each Disbursement this Period	
Candidate Name			Amount of Each bisbursement this Feriod	
		Category/ Type		
Office Sought: House Disburse	ment For:	.,,,,,	, , , , , , , , , , , , , , , , , , , ,	
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)				
C.			Date of Disbursement	
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Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
r dipose of Biobarooment	ose of Disputsement			
Candidate Name		Category/	Amount of Each Disbursement this Period	
		Type		
Office Sought: House Disburse	ment For:			
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
			737.50	
SUBTOTAL of Disbursements This Page (optional)		·····	737.50	
TOTAL This Boried (lost ness this line number set)			737.50	
TOTAL This Period (last page this line number only	J		.51.55	